

ACTUAL FACTS & METHODS
WHICH HAVE PRODUCED SALES

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H. G. FISCHER & CO., INC.
CHICAGO

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H. G. FISCHER & CO., INC.

PREFACE

This collection of papers is a product of our observation of the results attained by various salesmen through the employment of what appeared to be very different methods. The fact that one man produced sales on account of certain valuable points while another man produced sales on account of entirely different points led us to wonder if it would not be profitable to all the salesmen, as well as to H. G. Fischer and Company, if an effort were made to enable the men to have at their disposal, as nearly as possible, the various methods of all the other salesmen.

In requesting these papers it was specifically set forth that the data we wanted was exactly what the name of the manual implies - "ACTUAL FACTS AND METHODS WHICH HAVE PRODUCED SALES". In so far as possible we wanted to avoid, in these papers, telling a man what to do, what a new man should do, or any advice of that kind. Our idea was to divorce the contents of these papers from theory as much as possible and just record the facts. We specifically asked that each man give us only actual facts and methods which had, in his experience, produced sales.

This collection has not been edited or changed in any material way but is being forwarded to you as we received it in reply to our questionnaire. Intimate knowledge and association with a great many of the contributors has led me to make the explanation below.

In a number of the papers you will find men disclaiming the use of any high pressure methods. By the term "high pressure" they evidently mean dishonest or untruthful methods. Knowing them as I do I must point out the fact that by disclaiming high pressure methods they do not mean that they do not employ extreme insistence on securing the order and great tenacity of purpose in continually explaining to a prospective purchaser the use of the machine, literally almost hounding him to death with repeated calls and insistence until he does give them the order.

This explanation is made on account of the fact that the most successful men on the Fischer sales force have employed work, study, and tenacity of purpose to a marked degree in attaining profitable results. Anything that might create some misunderstanding in the mind of the reader along this line would certainly defeat the purpose of this collection. Hence the explanation.

A. W. Mathis

Chicago, Ill.
July 17, 1926

INDEX
ALPHABETICALLY BY SUBJECT

<i>Subject</i>	<i>Salesman</i>	<i>Page</i>
Accessories, Demonstration of.....	Dahl, W. P.	97, 98
Accessories, Sale of.....	Ballard, H. C.	88, 89
Approach, Method of.....	Trautman, F. G.	62-65
Arthritis	Murray, R. B.	56, 57
Arthritis	Reynolds, W. H.	78
Arthritis Technic	Grimes, W. S.	129, 130
Bronchitis Technic	Anderson, J. A.	48, 49
Classification of Doctors.....	Gutmann, L.	81-83
Classification of Doctors.....	Toennig, Fred.	58-61
Commercial Basis	Monteith, C. C.	72, 73
Confidence Inspired	Wallace, A. B.	45
Demonstration	Brasier, E. F.	13
Demonstration	Carthy, J. W.	116, 117
Demonstration	Kane, F. C., M. D.	115
Demonstration	Nilsson, E.	111
Demonstration	Wark, A. F.	44
Demonstration and Service.....	Collins, B. B.	23
Discharging Ears—Quartz Light Technic.....	Flake, Jr., L. T.	101, 102
Dysmenorrhea	Erikson, E. W.	1-9
Education and Service.....	Gawin, Raymond	28-31
Endocervicitis	Smith, R. B.	46, 47
Financial Benefits	Hersey, R. M.	42
Financial Returns	Burlingame, A. M.	109, 110
Fischer Company, Prestige of.....	Young, C. C.	10-12
Fischer Co-Operation	Jay, G. E.	120
Fischer Equipment, Efficiency of.....	Mitchell, C. McB.	43
Fischer Equipment, Superiority of.....	Devericks, B. W.	112
Fischer Goods, Superiority of.....	Vickery, W. H.	105
Frontal Sinus Infection.....	Kepner, G. L.	85
"G" Portable	Ajas, P. A.	124, 125
G. C. Technic	Coufal, E. B.	141
General	Cohen, H. H.	86
General	Kilmer, W. A.	126, 127
General	Simonds, F. L.	135
General	Turner, H. E.	138
Goiter, Simple	Erikson, E. W.	1-9
Gonorrhea, Acute	Connors, L. A.	68, 69
Gonorrhea, Acute	Metcalfe, R. L.	79
Gonorrhea, Acute. (Funck Technic).....	Holzer, H. H.	54, 55
Gonorrhreal Epididymitis	Smith, Ben M.	95, 96
Gonorrhreal Epididymitis	Studebaker, C. M.	14, 15
Hanovia Lamps, Economy of.....	Murray, W. W.	38, 39
Hemorrhoids	Yudin, M.	76, 77
Hemorrhoid Technic	Hunt, M. C.	51, 53
High Blood Pressure Technic.....	Anderson, J. A.	48, 49
High Blood Pressure.....	Erikson, E. W.	1-9
Honesty	Boening, C. H.	36, 37
Hyperemia	Benninghoff, W. H.	119
Income, Increase of.....	Rousseau, W. A.	147
Indirect Diathermy	Phelan, E. M.	103, 104
Investment, Returns from.....	Ayers, W. C.	106-108
Investment, Returns from.....	Holton, B. W.	137
Investment, Returns from.....	Morlan, A. F.	136
Ionization and Coagulation.....	McCaskill, H. L.	74, 75
Knowledge of Equipment }	Thomas, H. C.	16
Knowledge of Technic }	Walker, J. C. W.	19-21
Leukorrhea Technic	Erikson, E. W.	1-9
Lumbago	Sanborn, J. W.	33
Office Practice, Availability of.....	Erikson, E. W.	1-9
Pelvic Disturbances	Ginsburg, S. M.	133, 134
Price Cutting, Avoidance of.....	Robertson, C. H.	40, 41
Prominent Doctors, Influence of.....	Erikson, E. W.	1-9
Prostatitis	Smith, R. B.	46, 47
Prostatitis	Griffith, J. N.	32
Prostatitis Technic	Bagstad, C. C.	22
Pruritus Ani et Vulvae.....	Rauh, E. M.	87
Re-Canvass of Territory.....	Bush, F. P.	131, 132
Sales Points, General.....	Butine, A. B.	144-146
Sales Points, General.....	Finan, J. A.	113
Sales Points, General.....	Leeds, F. R., M. D	121-123
Sales Points, General.....	Manning, H. W.	118
Sales Points, General.....	Parker, Wm. L.	148
Sales Points, General.....	Thompson, W. H	114
Sales Points, General.....	Venuti, R.	99
Sales Points, General.....	Wade, H. W.	70, 71
Sales Points, General.....	Werner, A. L.	66, 67
Satisfied Customers, Use of.....	Walker, B. T.	34, 35
Sciatica	Erikson, E. W.	1-9
Service	Brinkman, F. G.	139, 140
Service	Bush, F. T.	92
Service	Kramer, B. M.	128
Service	Richardson, H. J.	84
Service and Knowledge.....	Harvey, J. M.	90, 91
Service and Co-Operation.....	Whitehead, D. H.	17, 18
Service and Education.....	Smyrl, G. A.	27
Space, Lack of.....	Leibovitz, L.	80
Special Terms, Avoidance of.....	Ginsburg, S. M.	133, 134
Testimonials	Nicholas, G. L.	100
Testimonials	Noahson, L.	93, 94
Tonsil Technic	Hunt, M. C.	51-53
Tonsil Technic	Johnson, R. E.	24-26
X-Ray Equipment	Remington, C. C.	142, 143

INDEX
ALPHABETICALLY BY AUTHOR

Subject	Page
"G" Portable	124, 125
High Blood Pressure Technic } Bronchitis Technic }	48, 49 106, 108
Investment, Returns from	22
Pruritus Ani et Vulvae	88, 89
Accessories, Sale of	119
Hyperemia	36, 37
Honesty	13
Demonstration	139, 140
Service	109, 110
Financial Returns	131, 132
Sales Points, General	92
Service	144-146
Sales Points, General	116, 117
Demonstration	86
General	23
Demonstration and Service	68, 69
Gonorrhea, Acute	141
G. C. Technic	97, 98
Accessories, Demonstration of	112
Fischer Equipment, Superiority of	1-9
Goiter, Simple	113
High Blood Pressure }	101, 102
Prostatitis, Pelvic Disturbances } Lumbago, Sciatica, Dysmenorrhea	28-31
Sales Points, General	126, 127
Discharging Ears—Quartz Light Technic	128
Education and Service	121-123
Price Cutting }	133, 134
Special Terms } Avoidance of	32
Prostatitis Technic	129, 130
Arthritis Technic	81-83
Classification of Doctors	90, 91
Service and Knowledge	42
Financial Benefits	137
Investments, Returns from	54, 55
Gonorrhea, Acute (Funck Technic)	51-53
Hemorrhoid Technic }	120
Tonsil Technic	24-26
Fischer Co-Operation	115
Tonsil Technic	85
Demonstration	Frontal Sinus Infection
General	126, 127
Service	128
Sales Points, General	121-123
Space, Lack of	80
Sales Points, General	118
Ionization and Coagulation	74, 75
Gonorrhea, Acute	79
Fischer Equipment, Efficiency of	43
Commercial Basis	72, 73
Monteith, C. C.	136
Investment, Returns from	56, 57
Arthritis	38, 39
Hanovia Lamps, Economy of	100
Testimonials	111
Demonstration	93, 94
Testimonials	148
Sales Points, General	103, 104
Indirect Diathermy	87
Re-Canvass of Territory	142, 143
X-Ray Equipment	78
Arthritis	84
Service	40, 41
Prominent Doctors, Influence of	147
Income, Increase of	33
Office Practice, Availability of	135
General	95, 96
Gonorrhreal Epididymitis	46, 47
Prostatitis }	27
Endocervicitis	14, 15
Service and Education	114
Gonorrhreal Epididymitis	16
Knowledge of Technic }	58-61
Knowledge of Equipment }	62-65
Sales Points, General	138
Classification of Doctors	99
Approach, Method of	105
General	70, 71
Sales Points, General	34, 35
Leukorrhea Technic	19-21
Confidence Inspired	45
Demonstration	44
Sales Points, General	66, 67
Service and Co-Operation	17, 18
Fischer Company, Prestige of	10-12
Hemorrhoids	76, 77

E. W. ERIKSON

Dear Mr. Mathis:

In response to your letter of April 20th, I am more than pleased to give the little technique that I have together with my ideas on sales to the boys, if I receive in return their versions of "how it should be done".

I can't imagine that there is a thing I know of that's harder for me to do than to tell a man how I sell equipment.

Then again there are men with our organization who have been with us a lot longer than I have (I've been with you actively less than a year) who have a great deal more ability than I have, and if they are willing to give me their ideas I am more than glad to give them mine.

The first thing I learned when I "offered equipment for sale" was that my competitor knew nothing about technique and neither did I. I at that time presumed that probably competitive equipment was being sold in Northern Illinois in spite of the fact that competition was weak on his ability to talk and actually demonstrate technique, so I made up my mind to learn to teach the subject of Diathermy technique rather than devote my time to studying whirlwind salesmanship.

So first as (1) I would say KNOW YOUR SUBJECT and be able to DEMONSTRATE technique, and high pressure salesmanship will take care of itself, rest assured of that.

As number

(2) I always REASON and agree with a prospect rather than ARGUE, because arguments are time wasters and do not make sales.

(3) Sell him on your product BUT DON'T FORGET TO SELL HIM ON THE H.G. FISCHER COMPANY (that's where you have competition licked): (a) Educational Dept. (b) our magazine (c) monthly clinics (d) yearly convention, etc.

(4) I always admit, should the question come up, that our competitors make good equipment (but I always show him where our product is superior ---- has been out longer ---- we make more than anyone else ---- and we are conceded to be the P. T. headquarters of America, etc. etc.)

#2

E. W. ERIKSON

(5) I always tell him that competitive salesmen (should he ask me about some man) are wonderful fellows, and I usually continue by saying that it's a shame they don't know technique. Then I show him why he should buy from me. BECAUSE I am with Fischer, have had the training, know more about technique (Why shouldn't we when almost all the big fellows have our equipment and most of the popular techniques used today have been developed on Fischer Apparatus).

Then DOCTOR remember this ---- no matter what machine you buy it doesn't make any difference, because in principle they are all practically alike, YOUR SATISFACTORY RESULTS, YOUR ABILITY TO DUPLICATE THE RESULTS YOU READ ABOUT AND YOUR INCOME depends on how well you can use your machine, and if my competitor can teach you better than I can, I want you to buy his machine. But he can't teach you better because he hasn't had the training nor is he in touch with the big men that we are because almost all the big men have Fischer equipment. We are in continual touch with them, and if you don't believe me here's a copy of our monthly magazine which goes to all our users, and I want you to tell me of any other company that takes care of the doctor AFTER the sale is terminated like we do. What other company sends you a wonderful magazine like that, maintains an educational department; puts on monthly clinics; puts on a yearly convention that last year cost us \$17,000.00. What other company does that?

And sixth I would say, never call on a doctor with the idea that physiotherapy is next to a cure-all ---- stay away from the word "cure" entirely. If he asks me about some pathology I usually state whether or not diathermy is "indicated" there or not, according to some physician he or I may know or according to some reprint that I might have on hand.

I am a great one for carrying reprints, clippings, articles, medical magazines, and subjects clipped from medical books where I can get at them in my brief case. You should

E. W. ERIKSON

see the size of my bag. I make it my business to continually collect them. Its surprizing how many articles are run in our daily papers under the "health column" on quartz light and everyone usually reads them.

You know its great when you can see by a prospect's countenance that he doubts you and you open your bag and show him some Fischer reprint or some article, or newspaper clipping (I used the one on Red Grange in the Chicago Tribune getting his arm fixed up with diathermy AND HE PLAYED FOOTBALL THE NEXT DAY quite a bit, when he was in vogue) and you get the prospect's confidence, and he imagines you probably do know something about the subject.

(7) Another stunt I pull while interviewing the prospect is to call some one of my satisfied users nearby and get him to tell the wonders of diathermy for me, to my prospect over the phone. However, be careful when you do this; feel the doctor out first and make sure they are not deadly competitors.

(8) I had worked for Fischer about two weeks when suddenly it dawned on me one day that in this game time is money, and if I ever expected to make real money selling diathermies and the rest of our line I had to get volume. Unfortunately we are handicapped by the doctors office hours many times, so I usually phone a number of doctors offices early in the day so I can line up my work so as to be in the various offices at the tail end of their hours. Even so, that never paid as well as wearing out shoe leather in the evenings after the last patient had beat it, planning on getting in the doctor's office about 8 P.M. Having no territory in Chicago in the early days, considerable of my commission was spent in hard earned carfare trying to get orders and then spending more money installing orders. This plus the time lost making two trips, was a problem to me, even after I was lucky enough to get the order.

So I made a peddler out of myself, and carry

E. W. ERIKSON

the stuff in the car, - call, sell, install and demonstrate at one crack, because it saves time. I've never hurt a "G" or a cart carrying them several hundred miles over bad roads, nor have I harmed a Morse Wave Generator, and I have never broken an AC Hanovia Burner yet, carrying it on the floor of the seat beside me, in our regulation crate. I usually wrap the "G's", etc. in an old blanket.

Carrying the stuff with you, not only gives you many more hours per week but the doctor sees what he is buying, (no photo ever does justice to any piece of electrical equipment) and when you hit him "cold turkey" and get his enthusiasm all worked up, go down and pull the stuff out of the car and demonstrate before he cools off and decides to sit down and write for catalogs from every diathermy manufacturer who advertises in the AMA. I know because I've had it happen. I've called on a man without my car, got him all worked up, couldn't close him, and when I got back there two weeks later to get the name on the dotted line, found him all loaded with our competitors arguments against our product.

If you carry the stuff right in the car, put it in, demonstrate on his patients, etc., he never thinks about other machines that might be made by someone else. Treating patients in his office and telling them to come back the next day makes getting settlements easier than NIGHT.

Even if he doesn't settle that night he feels under obligations to you for cutting up the block tin, using the soap, and cutting up the elastic bandage, etc., plus your time, and that, plus pressure and all the other arguments you have usually brings home the bacon. Always carry extra soap (in new tubes) block tin and elastic bandage with you, so if you fall down on a man, your outfit is ready for the next man that will let you work on his patients. However, I want to say this, that in my experience whenever a man would let me do all these things plus TREATING his patients the

E. W. ERIKSON

machine usually stuck. In fact just FOUR men have turned me down after doing all these things since I've been with the company. That doesn't mean I've just yanked out four outfits, because I have bad accounts too. The bad accounts I don't include because I actually got SETTLEMENTS on them, and the fact that they fell down several months afterwards was not my fault.

(9) There are many times I wish I had the nerve of my good friend Mr. Hunt of Detroit Office and could sell diathermies on the surgical side of this intensely interesting subject. But unfortunately I have a confession to make - I have never co-agulated a tonsil or a hemorrhoid in my life. One reason is the fact that when I am carting machines thru the wilderness I can't afford to wait in a town long enough for the doctor to decide whether or not the end result of tonsil co-agulation compares favorably with his regular surgical procedure. So about as far as I get with the surgical end of the machine is a quarter's worth of beef from the butcher shop and a demonstration on that.

Naturally when demonstrating diathermy machines that wear out good rubber casings, I usually ask the doctor to get medical cases for me to work on, which I know I can show results in 30 minutes per patient, and I ask him to procure for me patients that presumably have the following pathologies, any one of them.

Lumbago

Inflammation of the sciatic nerve

Dysmenorrhea

Arthritis cases (not arthritis deformens)

Sprains

Contusions

Bursitis cases

If I roll in the machine at 2 and can treat a half dozen of these cases for him, at supper time he'll wonder where he has been all his life. Now you see if I asked for simple goiters, gonorrhreas, ankylosed joints, fracture cases, etc. etc., I couldn't show him any spectacular results the first day I

E. W. ERIKSON

treated them, altho we all know diathermy does a great deal for these unfortunates in a comparatively short time.

I always make the doctor buy a loose leaf note book and have HIM draw pictures of the connections, etc., for the various techniques so he'll quickly get the hang of the machine.

The reactions of your demanding that he buy a loose leaf note book leads him to believe that you are very probably a master of your subject. Then after he's bought the machine, proceed to teach him ALL YOU KNOW.

DON'T MAKE THE TERRIBLE MISTAKE OF RUNNING AWAY FROM HIM and for goodness sake don't tell him you are in a terrible hurry and must get to Blanksville by 4 P. M. or 9 P. M. or NOON. Lead him to believe you are there until he's mastered the subject, then call on him until he does master it, then tell him he's on your STAFF as a prospect scout and if you treat him white believe me he'll fight for you.

Always remind him of his promise to be on your staff and tell him you are holding up your end by cleaning his gaps and wiping off the glass on his meter (in other words I mean actually giving him service tinkering around his machine, making SURE everything is 100% OK) but he is falling down on his end - "Where are the prospects he promised?" If you don't believe this works, write to Mr. Mathis and ask him how many equipment orders I have received OVER THE PHONE from men I never had seen or heard of.

However don't tell him how much you make on a machine, but lead him to believe you can only make a decent living if he holds up his end and talks diathermy to the fellow in the next town so you can sell him without spending too much time with him.

(10) So last but not least, by any means, I want to impress on you the amount of good you can do yourself financially by continually taking care of the men you have sold by keeping them pepped up, happy and satisfied.

E. W. ERIKSON

Inasmuch as I promised Mr. Mathis sometime ago to write an article (goodness only knows why he picks on me) on the competitive selling of HANOVIA QUARTZ Lamps and how to teach a doctor to get the results he can rightfully expect from an ultra-violet lamp, I'll stick to diathermy today.

My favorite technique is the SIMPLE GOITER work we can do with either a "G" or a Senior. It does not work satisfactorily in TOXIC or EXOPTHALMIC Goiters, in fact I know it does them harm, - especially the Toxic types. So to start be sure of your diagnosis. Give 600 MA to the neck A and P by means of the new style clamp electrode (well soaped) for 5 or 6 minutes. Wipe off the soap and powder the neck or goiter with talcum and use the glass HF surface electrode on the goiter by means of footswitch control until the goiter becomes pink. Light the Sands Iodine Vaporizer (we have them in stock at \$5.00 complete) for EXACTLY (very important) 2 1/2 minutes and spray iodine on the goiter until a light brown color. These fumes are absorbed into the tissue very rapidly, so if your technique has been right the neck is clean (all iodine absorbed in tissue) in 3 minutes after the treatment is over. You will find iodine in the urine one hour after the treatment. Treat them two times a week, never oftener and 8 to 15 treatments usually does the work.

In discussing high blood pressure cases with a doctor, always explain that all you can do is give them relief for a comparatively short time, and that they must be given treatments periodically to keep them out of danger. The Senior works best I think tho the "G" should work very well. With men who have many of these cases I usually hold out until I get a Senior order from them, by showing them Grover's reprint we have on "Hypertension", where he says in plain language to buy a big machine for this class of work. It would be well for all the boys to carry this reprint as an excellent argument for buying a Senior. How Many Of you have read the wonderful reprints the company gives away free to MD's? Boy, they are a

E. W. ERIKSON

medical schooling in themselves. Read them.

TECHNIQUE

Use the High Voltage Diathermy connections and have the patient lie on the cushion (clothing intact) which is connected to one side of the machine and the nickle plated handle which the patient holds in his or her hands (lying down) connected to the other side of the machine. First treatment 20 minutes only at 300 MA to see how the patient reacts. Sometimes the doctor completely overlooks some focal of infection, which a full dosage will stir up considerably, so I usually feel my way on the first treatment. If I get no reaction I give 500 MA for 30 minutes the second day and continue this setting of technique for 10 consecutive days. The patient at the end of the 10th treatment should have a blood pressure low enough to be out of danger (I mean by that low enough so as to be out of danger of having a stroke). I never hope to get the B. P. down to normal if the patient is elderly or has a deposit of mineral on the inside of the arteries. I think a great deal of the "H.B.P. Technique", tho, many physicians do not think it worth much. There's nothing a physician can do except diet the patient, and honest men will tell you that's not worth much, and that diathermy will relieve the symptoms, which are usually very disagreeable, with this pathology, gives them a tool with which to keep the patient alive that much longer, in my estimation.

PROSTATITIS CASES

I want to refer to the prostatitis cases we have in elderly gentlemen who must urinate a great number of times every night. By using the Prostatitis Electrode covered with KY jelly and inserted into the rectum so that the flat side of the electrode rests against the prostate, and using the Medium Voltage terminals with a large mesh on the abdomen, you can do wonders for them and they are grateful to the doctor forever after. About ten treatments finds them urinating twice a night and twenty treatments not at all, if they urinate before retiring.

E. W. ERIKSON

I treat for 30 minutes giving about 104F or 105F (higher if they can comfortably stand it) on the thermometer. Sims position or have them lie on their backs. Treat daily for ten treatments then rest them a week and treat ten more times.

Pelvic Disturbances in the Female.

I have a great deal of respect for Chapman's electrode. By cutting an immense block tin electrode that covers the whole female abdomen and inserting the Chapman's electrode in the vagina under the cervix proper (it can easily be done without the use of a speculum) and by treating at the ABDOMINAL toleration of the patient, wonders can be done for women who have pelvic congestion of any type, ovarian menorrhagia, endocervicitis, etc. I treat them daily for 30 to 45 minutes for ten treatments and then give them a weeks rest before starting another series of ten treatments using the medium voltage connections. I have found the Corbus endocervicitis electrode to be absolutely worthless in the FEMALE. (it is useful however in chronic GC infections in the male)

LUMBAGO, SCIATICA, DYSMENORRHEA, ETC.

Undoubtedly these techniques are all familiar to you, merely placing one electrode on the abdomen and the other over the lumbar region of the spine, placing the smaller of the two electrodes over the region of the pain. In lumbago, place small one over the seat of the trouble on the spine, in dysmenorrhea, small one over the pubis and large one over the spine, etc., etc., in inflammation of the sciatic nerve, one electrode over the back of the hip and the other on the outside of the knee, placing the smaller electrode over the region the patient complains about the most. I treat these cases daily for 30 minutes. Very few treatments clean these cases up nicely.

E. W. ERIKSON

Chicago, Ill.
4-27-26

C. C. YOUNG

My best sales talk so far or the one which has brought me the business is very simple.

I realize that my prospects are not very intelligent in the Physiotherapy lines and usually when they decide to go into it they get the bug all at once so they require immediate action and they don't want to be left in the lurch after they get their machine, neither do they care to deal with a Company on whom they can't depend for service or know that they are established. Swift shipment, honest dealing, quick service.

I boast of the fact that our heads at the factory are men of the highest reputation who are giving of themselves to help the Doctor help others and that we keep two boys at the Univ. of Wis. all the time doing research work for the Doctor; we have the best organized educational department of its kind in the work, of any factory in the world; we enlighten more doctors with our literature, clinics and conventions than any concern of its kind; we make many times more machines and sell many times the machines of all our competitors and we specialize on our work; we stand ready to prove our theory by actual tests with our machines before any learned body.

I call the doctor's attention to the fact that he gets with the machine sufficient accessories to do general work while many competitive machines are stripped.

During December I sold a man who had been told by my competitor that I wouldn't be able to give service, couldn't get the machine to him in a month and that I would sell him and leave him. I made no mention of the company but told the Doctor that if he would give me his order I would show him the swiftest deal in delivery he ever saw, also promised to see him often, told him to watch and see how soon he would get goods, also my service to help set up and show him the technique. It took 47 hours for that machine, which was an "L.O", to be placed in the Doctor's office after I got the name on the dotted line and I have seen that Doctor five times to render assistance on technique. Remember when you want to get into a work like this, a salesman must have a company back of him who will give immediate service, and on the other hand don't be afraid to believe you have the very best company to deal with, and show the Doctor that you are willing to give a little time to him and that he is always welcome where there is a Fischer man.

I am proud of my company and my goods and never am I

C. C. YOUNG

ashamed to place my goods along side of any one elses.

My experiences as a salesman are limited since I never sold a cents worth until I sold for Fischer, but, as a green man, I have made some sales because I can talk cases of any style to the Doctor, and am able to either apply or talk theory as to application and results to be gotten on any case. I have no special type of cases to talk, but can talk on any of them.

When I begin my talk on Diathermy for the first time, I tell the Doctor that we are after a heat and not the sensation of electrical current, that the tissues resist the current which causes heat. Tell them that nature suddenly responds to any temperature above or below normal and rushes blood to the localized region to take care of the condition. The blood is made up of Leucocytes, Erythrocytes and Platlets and an excess of Leucocytes or white blood cells are used to devour the bacteria or disease germs; they are phagocytic. The erythrocytes or red cells are to replenish the worn out cells. Therefore, we have an increase in metabolism or building up and tearing down because metabolism is the chemical process of life. The heat then attracts more blood to the local region and the excess of liquid helps to dissolve the accumulated excidates and gets them into the blood stream and into the channels of elimination. After this short talk the Doctor feels that I have an idea of the principles of Diathermy and is prone to have more told and nine chances he asks me to come in and see the conditions he has to deal with and wants to know if I think my modalities would help such cases. I have in mind some treatment for every case and explain just how it will receive benefit by Diathermy or Quartz or something I think he is able to purchase. I don't argue with a Doctor nor claim that I am always correct, but gain his confidence by asking him if my theory isn't logical, and most every time I sell, I get some excellent pointers on certain types which help me to sell the next man. In other words, I talk of the doctor's patients which he has on hand and make him feel that I come to help and not to hurt, and that he and I have the greatest opportunity in the world to do good, and that we are not going to get stung when we deal with the Fischer Co., for if they find that they haven't the best, they will soon find the error and have the best.

If a Doctor is crabby and don't want to talk my line, I excuse myself and tell him that I am glad to have had the pleasure to see him, and ask him if he knows of any one in his town who is interested for I don't want to bore

C. C. YOUNG

any man but am just trying to call on those who can see the new field, those who want to progress and get results. I ask this Doctor if he really knows what he is turning down, if he has any knowledge of the work, and tell him when he feels that he needs a friend to explain the work and help him choose his modalities, refer to my card and drop us a line. I sell what I sell because I feel and talk that I have the best goods and the best company and am always willing to help the Doctor on his cases.

I promise to teach any technique needed by the Doctor to whom I sell.

C. C. Young

Memphis, Tenn.
4-29-26

E. F. BRASIER

H. G. Fischer & Co.,
Chicago, Ill.

Dear Sirs:

I have very little to say about my salesman-
ship as I do not consider myself a real salesman. I
will say this, that what success I have had has been due
to the demonstration of surgical diathermy to tonsils and
to benign growths as well as malignant, and to getting
the Doctor to bring in painful conditions and there
relieve the patient, especially of lumbagos and fractures.

Sincerely yours,

E. F. BRASIER

Madison, Wis.
April 28, 1926

C. M. STULEBAKER1

The subject of Gonorrhoeal Epididymitis has been directly responsible for the sale of several machines for me.

I am convinced that the treatment of this extremely painful and troublesome condition, represents the most outstanding and spectacular result that is possible in the field of Diathermy.

It is true that the general practitioner does not have a great number of these cases, but if one is available it is a "sure shot". It is not necessary to have a Corbus clamp for the treatment, in fact, I believe the following technique is better, not only from the standpoint of convenience to the doctor, but the patient's comfort, as well.

Seat the patient on a large block tin electrode placed on an ordinary chair. Slip a folded dry towel through the elastic band of our regular #614 hand electrode and let the scrotum rest on the small electrode. No soap lather is necessary. The folded towel prevents the two electrodes from coming in contact with each other. Use about 1000 to 1200 M. A. for 20 to 30 minutes. In the average case, of two days duration, the scrotum is swollen to about the size of a large orange. The skin is stretched tight. During the first treatment you can actually see the swelling going down, as is evidenced by the wrinkling of the skin. The intense pain is immediately relieved.

If you can show this to a doctor, he will be in a good frame of mind to believe anything else you tell him about Diathermy.

11

Some time ago I attempted to discover the reason why some settlements for machines were easily secured, and others were delayed for days and sometimes weeks.

After checking back over the delayed settlements, I was surprised to find that nearly every one of them was due to the fact that the doctor was waiting for a definite result on some patient.

It was formerly my custom to ask the doctor to have two or three patients available and we would treat them during the demonstration of the machine. Naturally

C. M. STUDEBAKER

I explained to him that he could not reasonably expect any definite results from a single treatment, but at the same time, after treating 2 or 3 patients for him, and he not being able to see any change whatever in the condition of the patients, it apparently gave him impressions that had a tendency toward procrastination.

I figured that if we could secure the signed order with "conversation", then the settlement could be secured in the same way, with the added advantage of a few simple demonstrations on the doctor himself.

There is plenty of time after the settlement is secured to teach the doctor technique and he will absorb the information more readily, and be more appreciative of your efforts, after he realizes that he owns a Diathermy machine.

My motto, therefore, "For prompt settlements treat the doctor and not his patients".

C. M. Studebaker

Philadelphia, Pa.

May 7th, 1926.

H. C. THOMAS

H. G. Fischer & Co.,
2333 Wabansia Ave.,
Chicago, Ill.

Dear Mr. Mathis:

Relative to your request for an article "Actual Facts and Methods Which Have Produced Sales", I am afraid I am not a good one to call on for an article on this subject, but I do find that the main thing that has helped me is knowing my techniques, and equipment to the smallest detail.

I have also made it a rule to find out a Doctor's specialty before calling on him. I tell him that I understand he is an authority on his particular line and get him to think so even if he is not. I then ask him if he has ever used heat in the treatment of that particular condition. If not, I go into the treatment by diathermy, giving him all the information I have on that subject. I then give him a copy of reprints which I have during our conversation marked at his line. I have tried the order book technique but find they shy at it too much if shoved at them too strong the first visit. In a good many cases I have to demonstrate on a patient and when a Doctor finds you know how to go at it without hesitancy, he then begins to have faith in what you have told him. Baltimore has always been a very conservative town in many ways and the Doctors here have to be shown.

Very truly yours,

H. C. Thomas

Catonsville, Md.
May 5, 1926

D. H. W H I T E H E A D

H. G. Fischer & Co.,
Chicago, Ill.

Dear Mr. Mathis:-

Being a comparatively new man in the field, I have been loath to rush in any suggestions as to any particular rule for making Diathermy sales. But, if any one may profit from my experience, I am more than willing to outline my general procedure.

First of all, I approach my Doctor completely unarmed, just for the purpose of making his acquaintance. After thoroughly introducing my friend to the entire concern, from the shipping department to the President, I assume that the Doctor is desirous of adding any known and proven means of fighting disease and infection to his armamentarium. In nine cases out of ten my assumption is correct. Then it is Diathermy, first, last, and all the time.

In this region we have enlarged prostates galore, and Dr. Chapman's technique and reprints are very interesting sales talk. Study them. Hemorrhoids are very necessary adjuncts to a successful Diathermy salesman, and again, Dr. Chapman's technique and reprints bring home the point.

In my territory down here I have gained the reputation of being quite a handy man to have around during an operation by coagulation, due mainly to the efficiency of our machine. If this bit of information has preceded my appearance into the Doctor's office, so much the better.

Soon we are friends, mutual friends, and I am going to help the Doctor fight his battles against sickness and disease, but we alone cannot do it, we must have Fischer's Educational Department at all times. With the help of Fischer, he can't fail to improve his present methods.

I always carry a copy of the 1925 convention program. Names like Donnelly, Chapman, Cumberbatch, Elsom, Pope, and Duval make an impression, and they are always at the Doctor's service through Fischer. Our monthly magazine is here brought into its own.

I also use our letter-head with its 34 points of service. This interview has consumed 15 minutes up to this point of continued conversation, then the Doctor generally gets his inning, or his last half of it.

Now I find out the nature of the Doctor's practice, and

D. H. WHITEHEAD

suggest a Portable "G". No, he doesn't want a machine he has to carry outside, he wants office practice. And then when I know what he wants I try to arrange for him to procure it.

The next question that generally arises is where can he learn the proper application and how? Every Fischer salesman is a technician and when the machine is installed I will be on hand to see that he becomes a Physio-Therapist. I won't leave him until he is one. How long will I stay with him? Until he tells me to go home.

Now then, can't we start him out on an improved road to increased prestige and earning power? The investment is small, the terms? 5 percent for cash or 1/4 cash and as many notes as he desires up to twelve on the balance. In 48 hours he can begin treating his patients and start immediately to increase the respect and appreciation of his clientele for his very effort to use the latest methods known to the medical world to relieve them.

This is my general outline and in several instances has resulted in an order on the first call. No demonstrations, just service and co-operation, coupled with the ability to answer questions pertaining to technique, in a halfway intelligent manner.

If the first call doesn't get your order, you are in a better position to arrive at your objective the second trip.

If you think this worthy of reproduction, use it; if not, junk it, and if at any time I can be of any assistance to any of the boys, call upon me.

Yours very truly,

Louisville, Ky.
May 6th, 1926

D. H. WHITEHEAD

J. C. WALKER

Mr. A. W. Mathis, Mgr.,
H. G. Fischer & Co.,
Chicago, Ill.

Dear Mr. Mathis:-

Answering your letter of April 20th, concerning the volume, "ACTUAL FACTS AND METHODS WHICH HAVE PRODUCED SALES". I am sending you herewith my little contribution. I have not dwelt particularly on any single technique as I have considered this on the angle of meeting the greatest number of doctors which are the average men in general practice.

When attempting to get a Diathermy into the doctor's office, it has been my experience that the interest of the prospect is aroused when he begins to realize the wide field of usefulness Diathermy has in the average doctor's practice. He wants to know what all can be done with it and as I enumerate all of its various uses he makes mental note of those conditions with which he comes in contact most often, or with which he has unsatisfactory results in his own work.

If given a chance he usually mentions those things in which he is most interested and if they fit well into the scheme and I can be reasonably sure of good results in treating them I get him to have them at his office on a given day when I have a machine there. I always attempt to have him get a good stiff case of high blood pressure, a case or two of neuritis, or somebody with old pleuritic pains, and a case of leukorrhea. These three cases will cover three separate fields of work in all of which he is comparatively helpless. These are conditions in which with Diathermy you can show very prompt good results, and because of the spectacular speed with which relief is obtained, they create enthusiasm in the doctor and in the patient, who automatically becomes a booster for him.

The arguments in your favor in these cases are many, but the doctor must be reminded that this machine, while it is the best money can buy, is totally devoid of brains. In treating the blood pressure patient, I always mention to him that we do not expect him to believe that we are curing the patient of his trouble because his trouble is only a result of something else which is clearly up to the doctor to discover and correct. In the meantime he keeps the patient out of danger and in comparative comfort by the use of Diathermy. These patients always make good advertisement for the doctor because they feel

J. C. W. WALKER

and look so much better.

The point in technique that I would mention is that it is better to bring your patient to the point of gentle perspiration during the treatment. Sometimes this cannot very well be done but wherever it is possible it is advisable. I assume that it is unnecessary to give you every detail about the technique in giving auto-condensation treatments.

While treating neuritis or pleuritic pains the analgesic properties of Diathermy can be well demonstrated. The patient, here too, is a great help to you because he gets prompt relief and does not hesitate to say so.

The treatment of leukorrhea gives you an opportunity to talk about the great amount of gynecological work the doctor can do with the aid of Diathermy. As every doctor has dozens of stubborn leukorrhea cases as well as dozens of high blood pressure cases, with both of which he has poor success, these two conditions naturally interest every doctor. That is true also of the relief of the pain.

Practically all cases of leukorrhea are dependent on an endocervicitis or an endometritis to begin with. Either of these cases can be cleared up quickly with the aid of Diathermy and this affords me an opportunity to explain how at a temperature of 110 and 112 degrees Fahr. the organisms responsible for these conditions are either destroyed or so attenuated that they are easily overcome by the other body forces and eliminated. In this way he is clearing up the cause first.

The leukorrhea itself is then treated with mercurochrome and the galvanic current which usually produces very good results. The technique is as follows:-

"Use a glass vaginal speculum filling it well with a 10% solution of mercurochrome. Drop into this solution a wire connected to the positive pole of the galvanic machine. A large negative electrode should be placed on the abdomen, gradually increasing the current up to 25 or 30 M. A., according to the tolerance of the patient, and continue for about twenty minutes."

This should be done three times a week and in four or five weeks marked improvement will be noticed.

This treatment gives you an opportunity to work in the galvanic outfit, and as the average doctor has so many

#21

J. C. WALKER

of these cases it interests him in a second piece of equipment.

J. C. W. WALKER

Detroit, Mich.
May 4th, 1926

C. C. BAGSTAD

In my experience no one particular technique nor application of diathermy has alone been productive of sales. Coagulation of tonsils and hemorrhoids has made some, the so-called medical diathermy interests some men and is undoubtedly the reason for sales, but one point that I have found absolutely necessary and that is to overcome the doctor's fear of the machine and the consequence of using it.

I gain the doctor's confidence in my ability to show him properly how to use diathermy, overcome his fear of some imaginary terrible mishap to himself or patient, and I believe this procedure has made more sales for me than any other. I stress the ease of operation and control and the fact that he has a therapeutic agent always at hand which he can control as to dosage, etc. just as accurately as he can control any drug or chemical.

When some new chemical compound, drug, or what-not is listed among the new and non-official remedies in his medical journal, he does not feel that he must take one of "Sampson's Short Courses" in order to be able to use the thing properly or to gauge the results of its use. It follows that the doctor then, when properly instructed in the use, application and operation of a diathermy machine, which any well trained Fischer salesman can show him, will get more knowledge of the machine by himself than he will from these so-called courses. I sell him on the idea that he is not ready to take a course until he has a machine.

In regard to the sale of Kromayer lamps, the one point which has made more sales for me than any other is contained in the enclosed pamphlet on *Pruritus Ani et Vulvae*, by Dr. Herbert F. Pitcher, of Haverhill, Mass.

C. C. BAGSTAD

New York City
May 1st, 1926

B Y R O N B. C O L L I N S

- 1st. Asked Doctor what his general run of conditions were that he is treating at the present time.
- 2nd. Giving doctor full details of the technique to be used in these cases.
- 3rd. Going over machine both operating and construction with a technique between times when explaining machine.
- 4th. Noting of Service given with machine along with the persisting on making regular call backs.

Byron B. Collins

Milwaukee, Wis.
May 5 - 1926.

R O Y E. J O H N S O N

Mr. A. W. Mathis,
Office.

Dear Mr. Mathis:

In selling Physiotherapy equipment, I generally make my line of attack along six or seven forms of selling. Each form of attack is carefully layed out before I meet the particular doctor who is to become my victim.

Doctors' practices may be placed in three divisions and on each one of these divisions financial investment can be introduced successfully. Each and every time that I talk of financial investment, I hit upon the subject cautiously; but in the event that I have reached the climax of finance so cunningly as not to have aroused his wrath, you will find that money is his weakness.

The three divisions of Doctors' practices are:

1. The young doctor just out of school, who has practically no practice.
2. The doctor who has been out about 5 years and is wearing out shoe leather making outside calls.
3. The doctor who has six patients and up a day.

When I meet the young doctor who is just out of school, I generally hit upon the idea of his making money with physiotherapy equipment, and tell him how, by aiding a patient or two, he will have a couple of walking advertisements boosting for him.

In one particular case the doctor told me his father had financed him through school and would undoubtedly help him if he could be interested. The doctor spoke to his father without success and I finally encouraged him to introduce me to his father. After speaking for two hours to the old gent, he allowed his son to purchase a quartz lamp and a diathermy machine. I later treated the old gent for laryngitis with splendid results, and they soon helped me to sell two more outfits and are now my best boosters.

With the doctor who has a little outside practice but no office practice, I generally hit upon the plan of his building up an office practice with the installation of Physiotherapy. Ninety percent of the

R O Y E. J O H N S O N

patients that are called on at the home, can get to the office if they hear of some apparatus that the doctor has in his office that he knows will do them a lot of good. No doctor likes outside work, the office practice being the more preferred and the best financial gain. In instituting this office practice, it will also increase the number of calls, as a series of treatments is generally instituted in each case. The patients like these forms of treatments and they are generally all benefited by them.

If the doctor has a number of bed cases that should be treated with the GP, it is worth while to call on a few with the doctor and treat them. Making the first call with a doctor in a bed case of pleurisy, the patient felt so much better that he said if the doctor would not buy the machine, he would. To protect himself the doctor said he had already purchased the machine, and I received his check that night. I have often sold patients on the first call; the effect of the new form of treatment so enthused them that they said they felt better, and remember, selling the patient generally sells the doctor.

With the third division of doctors, which I place with those having from six to twenty-five patients a day, I generally lay the most cautious lines of attack for the interview. If he is hard to reach, I generally quiz his attending nurse or technician and I find out when it would be the most proper time to see him. It often means night work, but it is well worth while because these doctors as a rule are well fixed financially. It is often possible to sell them complete equipment. I look up the "Blue Book" rating, and if he has had an interesting career, I generally mention it in conversation. I then tell him that I have looked up his rating and on seeing that he is 100%, we take the liberty of making a special effort to place our equipment with a doctor of highest esteem in the neighborhood. A little flattery will never hurt. I show the doctor on paper how he can build up a physiotherapy practice, by having an attending technician, and making a lot more money than he is now making. In a few of these cases where the doctor confirmed my program, I hired or interviewed the technician and then sent them to the doctors. Upon being accepted by the doctor, the technician ordered the equipment which was generally everything we carry, - thanks to her. It meant hard work but it pays and these men always become your boosters. I always lay stress on hemorrhoidal work and I have assisted in a good many of these operations, which I as a

R O Y E. J O H N S O N

rule, let the doctor know about. This adds to your prestige because he is interested in you and he feels you will be a great aid to him in the new venture.

I cautiously approach him on the subject of tonsil coagulation and if I see that he accepts, I outline different forms of technique, one that is perhaps worth mentioning: "Doctor you undoubtedly would do a lot more tonsil cases if you would assure yourself and your patient that there would be no necessity for hospitalization, no general anesthetic, no hemorrhage, no pain, no edema and positively not a day lost at work. The current is tested to register 1800 millimeters on dead short, no infiltration is necessary, merely swab the tonsil with a 2% solution of butyn. If the tonsil is intact and not in shreds, make from two to three insertions with the needle depending upon the size of the tonsil. With each insertion hold the current on until you see a little tissue discoloration, not much, and make your other punctures either one or two so that your area of dehydration will be directly in the center of your tonsil."

"This suffices your first days operation. Three days later your patient will return and to your surprise the tonsil is two-thirds its normal size and it has receded from the pillars entirely and given you a safer field for operation. Then coagulate the tonsil in two or three settings, depending on the size, and I am sure you will get wonderful results. Do one tonsil at a time."

"You can work on your patient every third day, the result is wonderful, there is no scarred tissue, the pillars are perfect and the patient never felt their removal."

"A doctor friend of mine has removed about twenty-five pairs of tonsils this way and it worked like a charm. He will soon be here to lecture for us."

Cordially yours,

Roy E. Johnson

Chicago, Ill.
May 4, 1926.

G. A. S M Y R L

Selling points that have helped me.

- 1st. The service we have to offer the Doctor. No matter where he is there is a Fischer representative handy.
- 2nd. When we sell a machine we give the instructions and technique needed to operate the machine in an intelligent manner.
- 3rd. We are the only company doing this at this time.
- 4th. We can supply the Doctor with any information on physiotherapy he desires, if such is at all possible to procure.
- 5th. The Kolischer Spark Gap.
- 6th. We have the best diathermy machine made today.

G. A. SMYRL

Northampton, Mass.
April 27th, 1926

R A Y M O N D G A U V I N

When I call on a doctor or when he comes to my office, the first thing I do, naturally, is to tell him all about physiotherapy. After same has been well explained to him I tell him that it is not necessary to have a \$5000.00 installation to get results with physiotherapy. I insist on this because many doctors here who have travelled and visited large American or European cities have seen physiotherapeutic apparatus only in important hospitals and seem to be under the impression that it is used only in hospitals, also that they need a full equipment and a large staff to practice same. Physiotherapy not being taught in the universities of this Province, I have a certain educational work to do. In 90% of the cases the doctor tells me that it is all very nice but he confesses frankly he does not know anything about physiotherapy and says it is impossible for him to spend three or four weeks studying same in some American cities. I then ask him to give me so much of his time every day or twice a week or even less. I tell him I am at his entire disposal from morning till night. I tell him at the start that I have studied medicine for so many years and add that while in Chicago I was doing practical work from 9 o'clock in the morning till 6 at night, in the most important hospitals of this city and also in many private institutes. Speaking about Diathermy I often say to a doctor this: "Doctor, you remember when you were studying and were first shown how to make a dressing. When you knew how to make one you knew how to make many others, didn't you? Well, with diathermy it is exactly the same. When you know how to apply electrodes we will say in a case of arthritis, you know how to make many other applications. It is nothing difficult, but one has to be shown this, and that is my work, Doctor."

I attach great importance to the firm I represent. I believe a large percentage of my sales were closed owing to the fact I had succeeded in inspiring in the client full confidence in the firm. A man always likes to deal with honest people, and when I speak about H. G. Fischer & Co. I tell the client that if he buys from us he is then dealing with the largest concern manufacturing physiotherapeutic apparatus, consequently getting the best goods at the best prices. I try to impress the client with this fact and insist upon the good service which, above all things, the firm wishes to give, telling the client we take as much care of him after he has bought as we do before. I speak about our Educational Department which represents big sums of money; tell him that said department receives every medical review published in the world and that any valuable article therein published, concerning physiotherapy, is immediate-

R A Y M O N D G A U V I N

ly reprinted and then made available to their clients.

The most important ones are inserted in our "Monthly Magazine" sent to all our customers. As some doctors here think that anything that comes from U. S. is bluff or more or less so, I tell them that there is no bluff with H. G. Fischer & Co. About reprints I explain to them that these articles were not written especially for the firm but carefully selected by them as being particularly useful to the medical profession. One point on which I insist is that the man who buys from us is not paying more but getting more. I then explain to the client that if he buys an apparatus and is not shown how to use it and also not properly trained as to the techniques, etc., he is better without it. A man that would buy an automobile and could not use it would not find his investment very good. I tell the doctor that if he buys from a jobber he is paying the same price but is getting far less for his money as he is not getting any service, which is a most important thing. I tell him when he speaks to me about the Wappler machine, which is sold through Ingram and Bell here, that the Wappler people do not know he has one of their machines.

But when he buys from H. G. Fischer & Co. he is dealing direct with the manufacturer. The main thing is that in such case we teach him how to obtain 100% results with his apparatus. I often cite the case of a Professor of Laval University who is one of the best surgeons of the Hotel Dieu Hospital of this city. The first time I called at this Professor's office I asked him if he were satisfied with the service he was getting from his machine (L.O. Cabinet T.P.). He said the machine was giving him perfect service. I then asked him if he was doing any medical diathermy and he answered that he would have liked to but the machine was not fit for that. I then asked him if he was doing any surgical diathermy to which question I got the same answer as above. I said, "Doctor, I believe the man who sold you this machine knew very little about physiotherapy. The machine you have had in your office for three years can certainly be used to do medical and surgical diathermy. If you will allow me I will call tomorrow, will bring some meat and will show you how simple it is with your machine to do electro-coagulation". The next day I went to his office and showed him how to do medical and surgical diathermy. Since that time this surgeon practices electro-coagulation three or four times a week and is much satisfied with the results obtained. Then I say to my future client that this will not be the case with him and that he will know as much about medical and

surgical diathermy after a few days of proper training as the above mentioned surgeon knew after three years.

In nearly all cases I demonstrate how electro-coagulation is done. I explain to the client that in this operation the active electrode does not become hot as in the thermo-coagulation. I tell him that in practicing same the active electrode is so small compared to the indifferent electrode, and recall to his mind the fact that when two electrodes of different sizes are used the heat goes to the smaller one. I then tell him that, the active electrode being so small, instead of producing destruction of the tissues, it is destruction we get on account of the intense heat. I tell him that while in Chicago I often heard surgeons in the Cook County Hospital say to visiting confreres who were assisting at some operation done with electro-coagulation that in 50% of cases treated preference is given to this method. I then speak of Bordier from Lyon, and show to my client one book I got from France, entitled, "La Haute Frequence en Oto-Rhino-Laryngologie" written by Leroux-Robert. The introduction is made by d'Arsonval. (Copyright 1925 by Masson & Cie, Paris.) In this very recent book Bordier is often mentioned. I know I have made a few sales to specialists in oto-rhino-laryngology and also to others due to the fact that I had passed them the above mentioned book. I consider that after having given certain explanations about physiotherapy the idea of lending such a book to a man who is already much interested, is frequently the cause of his quick decision to buy. In reading this book he sees that high frequency currents are much used in France and reads about many interesting cases treated by Leroux-Robert who is one of the best men in Paris. I often say when I go to a doctor's office to lend him a book or a medical review, this: "Well, Doctor, it is a pleasure that I bring you such a book or medical review. I believe I have told you enough about physiotherapy; I will now leave the job to one of your confreres, a man who is absolutely uninterested. After reading only one chapter, you will be convinced of the importance attached to High Frequency currents in France."

I have also a book entitled "Les Rayons Ultra-Violet en Therapeutique" by Dr. J. Saidman (1925, Gaston Doin, Editeurs, Paris). I believe this book will help me in selling Quartz lamps.

I have sold one galvanic outfit after having lent to my client the American Journal of Physiotherapy, Volume 2, No. 7, in which is published an article written by Dr. E. C. Duval, entitled, "Physiotherapy in Industrial Medicine." Said client wrote on my suggestion to insurance companies announcing to them that he was in a position to attend to all industrial cases. He used in

his letter many arguments reported in Dr. Duval's article. The result was that he is much encouraged by the insurance companies. Since then this client has helped me in making a few sales.

During my stay in Chicago I bought the Journal of the American Medical Association (October 10th). I always carry this number with my catalogue, etc. I have passed same to doctors in three or four cases and believe it had a lot to do with the sales made after the reading of said articles. The idea of using a medical review instead of a reprint I may have on hand is that it looks more scientific or less commercial. After he has read the article I say to him: "You certainly know the value of this medical journal and you know perfectly that articles published in it are written only by medical authorities."

I am frequently told by doctors when they come to my office that they find the prices high. They say that they can get a machine at a lower price. To this objection I answer that often the cheapest machine is in the end the dearest. I tell them that 85% of the high frequency machines used in the U.S. come from our firm and that this means a lot. I tell them to stop one minute and think that this firm has enough commercial sense not to sell an article at such a price if they could sell it for less.

The technics I use are the following, naming them in the order of their importance of the use I make of them.

Electro-coagulation, Tonsil Coagulation, High Blood Pressure, Hemorrhoids, Acute Gonorrhea, Goiter, Pneumonia, Arthritis.

RAYMOND GAUVIN.

Quebec, Que., Can.

J. N. G R I F F I T H

Dear Mr. Mathis:

Replying to your letter of April 30th, in regard to various kinds of technic, which I find helps me to produce sales of Diathermy Units.

I use different technics, of course, in accordance with what the doctor specializes in, or cases of which he has a considerable number.

The average practitioner, as I find it, has a considerable amount of "G.U." work. If he does not do any "G.U." work he at least has several cases coming into his office now and then, which he refers to other doctors.

Prostatitis, both chronic and acute, is a condition which I find is of interest to the average practitioner.

I use the following technic; "Prostatitis, both chronic and acute, is a condition which is treated very successfully by diathermy.

We have a special prostatic electrode, which fits next to the prostate, and a large indifferent electrode of block tin about 8 x 8 which goes on the abdomen. Due to the fact that the electrode on the abdomen is so much larger than the prostatic electrode practically all of the heat is concentrated in the prostate. We can reduce the size of the prostate if it is enlarged. This heat dispenses with the soreness and congestion, which causes less frequency of urination.

You can readily see, doctor, with this indication alone that it is very valuable to you in your practice. You no doubt at the present time have one or two patients where such condition exists. I will have a machine delivered to you, treat some of your patients, and you may see the actual treatment given."

The technic of prostatitis which I have gone through very briefly, is one I use considerably, as I mentioned in the forepart of my letter. I do not try to close a doctor on just one technic alone. Ordinarily I give two or three different technics, then suggest a date in the near future for delivery. If he refuses, I take it for granted that the date of delivery I mentioned was not convenient, so I immediately divert his mind from the closing to one or two indications and technics, also mention Colleges and Institutes that are using it. Then I close again in the usual manner only having the date of delivery one or two days later than the first date of delivery I mentioned when I tried to close.

Detroit, Mich.
April 30, 1926

J. N. GRIFFITH.

J. W. SANBORN

Everyone likes to buy, but no one likes to be sold. I don't try to sell them. I try to picture the profit and prestige that my product will bring in such a light that the prospect becomes anxious to buy.

I stress the points of profit, pride, prestige and future ease of office practice.

Profit will come through the willingness of the patient to pay a big fee for surgical work because he escapes cutting, hospitalization, the need of a general anesthetic and the saving of all other items of expense. In medical diathermy, the fact that an assistant can give all the treatments while the practitioner is away, thereby having her bring in revenue instead of being an expense.

The fact that this work is such a mouth to ear advertiser brings prestige to the practitioner, and it is a source of pride to him to have patients referred to him from distant points.

This allows him to gradually build up an office practice and to discontinue his unremunerative outside calls. I try to paint this picture in the brightest colors possible as I believe it is a strong selling point. Also the fact that his new work will come mostly from the well-to-do, educated, thinking class where good fees can be charged.

Then I dwell strongly on the value of the educational department of the Fischer Company. This seems to appeal to the prospect. Finally on the high reputation the Fischer goods have enjoyed in the years past.

J. W. SANBORN.

Atlanta, Ga.
May 1, 1926

B E R N A R D T. W A L K E R

In the sale of physiotherapy apparatus, I find that a good degree of education and knowledge of physiotherapy is necessary on the part of both salesman and prospect. When I can refer a physician to several leaders in the profession who report successful results in the use of physiotherapy, they soon become interested and responsive to further information. Then I usually follow this with reprints and other literature issued by H. G. Fischer & Co. and I refer the prospect to recent articles on physiotherapy in the leading medical and surgical journals. After this information has taken effect, or while it is bringing the desired results, I will give a demonstration in actual treatment of some malady where physiotherapy is indicated. The demonstration is usually followed by a sale and general satisfaction on the part of the physician, the patient and the salesman.

One point that I stress with good results is the exceeding simplicity of operation with convenience in technique which is a notable feature of Fischer Diathermy machines.

Another point that I have used to advantage in selling equipment is the fact that FISCHER LEADS IN THE PRODUCT-ION OF DIATHERMY APPARATUS.

Some sales that I have made have been greatly influenced by emphasizing the Fischer iron-clad guarantee which is incorporated in each sale agreement and the advantage of prompt service in the event of machine trouble.

The fact that physiotherapy apparatus can be operated most effectively by a nurse or trained helper has helped to sell equipment to busy doctors who otherwise would not be inclined to purchase.

Another means of selling which I have found to be effective is to have a prospect refer some of his patients to a friendly doctor who is using physiotherapy. This can often be accomplished successfully, especially when the friendly doctor is your customer and is using your equipment.

Sometimes you can have a customer help you with a prospect by talking of his successful treatments and showing his machine and even demonstrating in his office to the prospect or to those who have not been considered actual prospects. I have made some sales which have been due largely to satisfied customers giving their support in this way.

One enthusiastic Quartz Lamp customer who is president of the District Medical Society, is planning to have a paper on Quartz Light Therapy read before the next

B E R N H A R D T. W A L K E R

meeting of his society.

I find that an agreeable nature with the spirit of courtesy and accommodation are valuable assets in winning a prospect which eventually results in sales in most cases. I have recently closed deals with two last year's prospects, one of which was of two years standing. In the latter case the prospect was delayed in effecting plans to accommodate the new equipment.

BERNARD T. WALKER

Asheville, N. C.
May 1, 1926

C. H. BOENING

Dear Mr. Mathis:

I wish to congratulate you on the splendid idea to induce the salesmen to interchange their ideas concerning sales and methods used to get customers and buyers. I will state briefly how I have made sales and satisfied customers.

First and mainly, honesty; - honesty in conversation and honesty in dealing with the buyer. Our competitors seem to delight to knock the Fischer equipment - they overstate their machines, they even insinuate that an ordinary practitioner can do the impossible. In this manner they perhaps make a sale but very often not. It does not pay to knock; still, I am always ready to meet our competitors in the open field; I'm always glad to back up my statements with actual work and demonstration. I ask the Doctor to get patients to his office for treatments. A short time ago I made a sale by going out with a doctor to a patient who had lobular pneumonia. It was 10 P.M. and when we arrived we found out that they had only a 32V D.C. plant but the neighbor was equipped with 110V A.C. so I investigated the ground, got ahold of 500 ft. telephone wire and by 12 P.M. we were all set to go and the next day I got the order for a G.P.

On another occasion I gave a Doctor some advice as to his X-ray technique in treating fibroid tumors; he took me up on my statements, got the patient up to his office, and I treated her successfully. This gave him confidence and I got an order, - he promised me some more for the future.

The second requisite in selling physiotherapeutic equipment is a fair knowledge of anatomy and a good knowledge of the equipment sold, and still a better understanding of the competitors' machines, - their faults and their advantages over the Fischer. This will convince the Doctor that the salesman knows his business and that he is competent enough to give him expert advice and service. To many a customer the service is just as important to him as the value of the equipment. Here in my territory our competitors advertise their efficient service, but they never give it when wanted, as a Doctor told me last week. I'm always willing to help and advise when I'm asked to do so, and when I can do so intelligently. Last year I was installing a 27" X-ray for a clinic, and the Doctor asked me several questions concerning the Burdick lamp. I answered him as good as I knew, and he smiled bitterly and said, "Well, that salesman gave me the impression that I could raise the dead with a Burdick lamp; when he comes again I give him the gate." I try to stick as close as possible to the

#37

C. H. BOENING

Fischer method, rather understate than overstate.
Honesty, integrity and hard work, are the keystones
to many and good sales.

Hoping this will reach you in time to get into print,
I remain

Very respectfully yours,

C. H. BOENING.

St. Paul, Minn.
May 5, 1926.

WALTER E. MURRAY

Being comparatively new at the game of selling, it is not difficult for me to recall my first sale of a Diathermy outfit. At the outset, I want to state that, in spite of all theory, there is an essential difference between the average Canadian and average American practitioner. This difference is chiefly a financial one, in that the average Canadian doctor has not the ready cash that his American friend has. This fact tends to make him more cautious, a little more conservative, and therefore, harder to sell. He is not able to take such a "chance" as he would otherwise be able to do, and before buying he must be convinced first of all, that the use of the apparatus will be "ethical", and secondly that it will be a wise financial investment. Therefore, my first efforts were centered on the Physiotherapy department of the Montreal General Hospital, in order that I might be able to quote the institution as a user. While attempting to sell to the Physiotherapy Department, I heard that the Senior Surgeon of the Hospital was interested. I switched over to him. By the time I met him, I found that he had already seen three other makes of machines demonstrated. I got him up to my quarters for a demonstration. Knowing that he was intending to buy some machine or other, I concentrated on the outstanding exclusive features of ours. He wanted an outfit for surgical work and which at the same time could be utilized for ward work. Had just about decided on a Liebcl-Flarsheim. The only features I took up with him, after going through the machine, were the price, the spark gap, the safety fuse, and the double scale removable meter. I got his order the same day, for a Hospital Unit type "G" on cart.

The next day I went down to the Doctor in charge of the Physiotherapy Department and intimated that he was rather slow allowing another department to get a piece of Physiotherapy apparatus before he had it in his own department. Luckily for me, he got sore, and did not calm down, until he had been authorized to purchase a duplicate machine.

As soon as I had my first machine in, I gave them all the service I could. Every doctor to whom I talked, I emphasized "Service," and it certainly has been responsible for the majority of my sales since. I made it a point to give all the pointers I could to the young doctor who was operating the machine and he has directly sold three machines for me.

In the Quartz Lamp field, I feel that every sale which is lost to a competitor is due to some fault of mine. I was called on the phone by a Dr. L. Lamoureux a short time ago, who asked me to give him the price of the Alpine lamp. I told him that I would call on him in the morning and talk it over with him. His first question was "Why haven't Hanovia Lamps got rectifying bulbs?" That gave me my start. I explained that the Hanovia

W A L T E R W. M U R R A Y

Company were the only ones to manufacture an alternating current burner. Our competitors have to rectify the current and in doing so, employ four rectifying bulbs. These bulbs are supposed to give five hundred hours service. A set of them costs about fifty dollars. Suppose your burner is to last two thousand hours, then he will have to buy three new sets of rectifying bulbs. His first cost for either a Victor or a Burdick is much more than for a Hanovia, and if he adds this \$150.00 to his first cost, he will see that the expenditure is much greater than for one of ours.

He then came back with what I find to be a stock question from doctors who have been interviewed by competitors: "But a Burdick will produce an erythema quicker than a Hanovia". I quoted him the U. S. Bureau of Standards which has issued a report stating that there is no essential difference in the quality of the rays emitted by the various Quartz Lamps on the market. That is, instead of flatly contradicting the other fellow's statement, I allowed them to be equal in therapeutic value and came right back at the first cost, asking him why he should pay more for a thing which the U. S. Bureau of Standards states is not superior. I then referred him to a doctor in a local hospital who is using the three makes of lamps, who says that he sees no difference between the effects of the various lamps but that if he was buying again, he would buy a Hanovia for two reasons. First, because they are cheaper, and second, because there is only one chance to five that anything will go wrong with the Hanovia as compared with a competitive lamp on account of the fact that there are four rectifying bulbs and one burner to require service on in place of one burner. I convinced him the next day after he had interviewed a competitor.

This contribution will of necessity be short on account of my short experience. I believe that a fellow will earn big dividends on keeping after his prospects by writing them, calling on them and giving them service at all times, as well after as before the sale.

To sum up, I find that it is easier to sell a Doctor who has already seen competitive machines demonstrated because he is in a position to recognize our superiorities, and I find that in every case the facts which have made my sales possible have been forcing demonstrations, inviting comparisons, giving constant service, and shooting the order book at them.

Cordially yours,

Walter W. Murray.

Montreal, Canada.
April 29, 1926.

C. H. R O B E R T S O N

Mr. A. W. Mathis,
C/o H. G. Fischer & Co.,
Chicago, Ill.

Dear Sir:

This is offered in response to your valued request of April 20th. Your idea is an excellent one and should be of great value to the boys.

In a city the size of Cleveland or in any city or community where the majority of the professional men get together regularly once a week to discuss various angles of their practice, you will find the "rank and file" are influenced by the opinions of a comparatively few ring leaders. Their influence is felt largely because they dominate on hospital staffs and committees and therefore are well worth cultivating; they are earnest workers and usually very conscientious. However, as they are very busy, it is difficult to get them to try new methods of treatment.

With this fact in mind, I arranged an appointment with one of the busiest and most dominating men in the local medical council. Going to him, I made a short statement regarding the principles of diathermy, told him his own knowledge of pathology would indicate the field for the use of it; simple practical instructions to his technician would enable her to give the treatments, that he would not have to take any man's word for he could prove it out in his own office, without loss of time or expense to him, and asked him when I could bring in the outfit.

He said it was all quackery and he did not want to waste his time on it but if I wanted to bring it in and show what could be done, assume all the expense and responsibility, to go ahead, show the technician and he would see that we got the cases.

A "G" was installed, the nurse coached and we began to treat cases. In tractable pains, stiff joints, aching Prostates, Lumbago, all yielded beautifully, until finally the doctor's cupidity got the best of him and he asked "how much discount for cash?"

I learned later that during the first day or two that the "G" was in his office, he had laughingly remarked to some of his colleagues that he had a "Quack" in his office and that he was having a good laugh at my expense. However, since then he has "discovered" many new and wonderful ways of using diathermy, and considers himself quite a "Columbus". He has been of considerable

C. H. ROBERTSON

value to me since, and his conversion was well worth while.

Practically all of the local council members will readily admit that if S.----- is satisfied "it must be good."

Moral: "Get the tough birds first."

Yours truly,

C. H. Robertson.

Cleveland, Ohio.
4/29/26

R. M. HERVEY

Dear Mr. Mathis:

I am very sorry I have not answered your letter regarding selling technique sooner. I am afraid I am unable to give you much that is original or definite in the line of technique that sells machines.

The only policy that I do adhere to that is productive of sales for me is making every effort to see physiotherapy from the doctor's viewpoint. I talk physiotherapy and Fischer service and all that service means to me to a doctor with the end in view that such an installation will mean money, prestige, and increased practice to him. In talking a particular technique to him, I try to picture the financial benefits he will enjoy in his practice by using such a technique. I find that the average man is not so much interested in the finer points of physiotherapy as he is in what they will mean when applied to his practice.

I realize that this is more or less obvious to any salesman, but personally I find it mighty easy to sell a man for the sake of the sale and the commission involved, but to really sell a machine and make it stay sold, I have to work from the other side of the fence as it were.

When I started selling I was more or less at a loss for words after a few minutes of demonstration, so I made it a point when I reached such a stage to talk the financial benefits enjoyed from diathermy. I found that the big percentage of my men were vitally interested in that angle of the demonstration so I have felt justified in making this point a big feature in my sales talk.

I am very sorry I am unable to give you something that will be of more use to you in your exchange of ideas. I am looking forward to reading the technique of some of the other men who have approached the subject from a more scientific viewpoint.

Cordially yours,

R. M. Hervey

Lansing, Mich.
5/1/86

C. McB. M I T C H E L L

Mr. A. W. Mathis,
Director of Sales,
H. G. Fischer & Co.

Dear Mr. Mathis:

Being a very new salesman with the H. G. Fischer & Co., I am afraid at this time I cannot contribute very much of a sales talk and lay very much stress on any one technique.

In one instance where I accomplished the placing of our "L O" Diathermy in the Mercy Hospital, at Devils Lake, North Dakota, I talked a great deal on the treatment of Pneumonia, and also Arthritis, explaining how simple it was in the placing of the electrodes and the ease of giving the treatment, what a marked relief it was to the patient, and that they invariably inquired for the treatment again. It was hard to get this hospital interested at first, and really the Mother gave me a very short hearing on my first call; but I returned and had in the meantime one of the doctors in town who has by the way a cabinet type of another machine, see the Mother and talk the Fischer machine to her. He did. The consequences were that I placed the machine and an Alpine Sun Lamp, and they are very well pleased.

I have talked the efficiency and dependability of our equipment and the Kolischer Spark Gap.

Now, as I have stated before, I have only sold a few machines, and am very sorry that I cannot contribute more, so will have to be this time like a sack of cornmeal in a corner with water around it, it soaks up. I am anxious to do the same in receiving the technique of the more experienced Fischer salesmen.

Yours very truly,

C. McB. Mitchell.

Devils Lake, N. Dak.
April 26, 1926.

A. F. W A R K

Mr. A. W. Mathis,
Chicago, Ill.

Dear Mathis:

Your form letter, dated April 26, with reference to "actual facts and methods which have produced sales", reached me too late in order to have my reply in your hands by May 3rd.

What I have done and am doing can be said in a very few words. I find that over ninety percent of my sales are the result of the actual demonstration of the machines. As soon as I obtain the doctor's interest and attention, I ask his permission to leave the machine with him (if it is a portable) for a few days until he can get together a few patients for the purpose of a demonstration. I then make an appointment with him for a demonstration. After the demonstration has been made I try to get a settlement from him right away. If I am not successful in obtaining immediate settlement, I leave the machine with the doctor and tell him I will see him again in a few days or on my next trip. If he permits me to leave the machine I am reasonably sure of getting a settlement out of him.

I have lost four sales during the past year because of the doctors changing their minds almost immediately after I have left with their "deposit" checks, and they stopping payment on their checks for some reason or other. Since then I invariably ask them to give me Chicago exchange for the first payment as it is not such an easy matter for them to stop payment on Cashier's checks. I am not now, and for the past eight or nine months have not tried to sell Hanovia equipment on account of the despicable methods of the Hanovia representative in this territory and for this reason am devoting my entire time to Diathermy equipment.

I also find that I have to make at least five or six calls on a doctor (the average doctor) before I can sufficiently interest him to consent to a demonstration, and I am of the opinion that the actual demonstration of the machine "makes it 90 percent sold". Further, I find that down here in the south it is impossible to get by with so-called barn-storming methods and that the doctor must be handled very ethically.

Cordially yours,

A. F. WARK.

New Orleans, La.
May 3, 1926.

A. B. WALLACE

Personally, I believe the first thing to do in the successful sales of any line is to get the buyer's confidence. I seldom expect a sale on my first interview, but do try to gain the confidence of the physician and later sell him. With the idea just outlined I will relate just how I got an order in competition with another salesman representing for several years his house in this same territory and he is considered what we usually call a "Cracker-jack".

I called to see a physician and told him I had dropped in not to sell him but to explain Diathermy to him, and its usage. Well, I got his undivided attention, and was able to talk as long as I cared to. Consequently, I could get such points as I considered most important to stick and at the same time got such information as to about when he would be in line for a machine.

How did I get his confidence? I did it by not trying to sell at that time. I did not see this man for some time later, and by the time I saw him I guess there had been tipped off a dozen competitive salesmen. So I got on the train, grip in hand, and started out so as to reach my destination as early as possible next morning. Well, you can imagine my feelings when I walked in to find this buyer engrossed in conversation with the "Cracker-jack" salesman from a competitive house. I met the two, exchanged a few words, and told this salesman I would stand back as he had gotten there first. So I left, feeling my sale at that point was well in the balance, and under the conditions that other fellow had a little the best advantage. Now this salesman stayed in that office from eight-thirty A.M. until twelve-thirty P.M., but he did not get the order. I returned at one-thirty P.M. and asked, "Well, did you buy a machine?" He said, "No, we did not buy from the other salesman, we are going to buy from you".

Well, I began to analyze the facts and I came to the conclusion that the only reason for selling that machine was his confidence in what I had told him on my first trip.

A. B. WALLACE.

Birmingham, Ala.
May 1, 1926.

R. B. S M I T H

Mr. A. W. Mathis,
Mgr., Retail Sales,
H. G. Fischer & Co.,
Chicago, Ill.

Dear Mr. Mathis:

Yours of the 20th inst. reached me here this A.M. and I am very glad to offer my little bit in explanation of sales made and how.

The greatest thing about Diathermy is the fact that on two of the most obstinate cases in general practice - Prostatitis and Endocervicitis - it works! This is not simply a theory, because the ability to place the heat on the affected part to a degree that is positively known and to maintain that heat for a length of time sufficient to give attenuation or death to the germs of infection, opens a way of treatment for the chronic who has come to be a disagreeable factor in every practice - nothing to be done for the old chronic prostate but surgery which is often not advisable on account of age and in the vaginal cases the extremes to which surgery has gone in using the cautery should make any Physician who is trying to give value received stop and think before refusing to take on equipment that gives modality.

We have seen in our time in sales work in the field - a man waiting on the door step of a doctor whom he had cussed out for being a hold-up man, when told that he could have treatments at \$3.00 each or \$100.00 for the case - not waiting to cuss him some more, but waiting to say that for the first time in seven years he had slept for more than two consecutive hours in peace and that he was ready to come and be taken care of, if the doctor would forgive his burst of profanity the proceeding day. But most interesting of all to us was the fact that he had a check for \$100.00 in his pocket and that it was Good!

Others to whom we have talked have been patients treated as long as three years ago and who tell tales of help through diathermy that they had searched for for years without avail.

Cases of Endocervicitis that have been resisting medicine obstinately apparently turn and disappear.

When we consider the other possibilities of the physiological results of the use of heat in deep seated conditions the field widens to a point where it is limited only by the user's knowledge of his pathology.

R. B. S M I T H

No man who will consider diathermy in its proper place, i.e., a very important adjunct to his practice, can fail to make it produce results that are, to say the least, very satisfactory both to the patient and the practitioner.

I venture to say that in my limited number of sales the majority, possibly 75 percent, have been dwelling on these two conditions. Then when the results are good - as they are nearly always - when poor pathology has been at fault, the doctor who has not been oversold gradually expands his field until in many cases he is using equipment of which he was decidedly skeptical on first contact.

Perhaps the reason this angle of mine sells the stuff is that I have personally followed over a period of over three years, two cases of fibrosis of the prostate who had been condemned to early death as they had refused surgery. They are both still on the job - both in good shape and still going strong.

Sincerely yours,

R. B. SMITH.

Seattle, Wash.
April 28, 1926.

J. A. ANDERSON

Doctor Smith, Anderson is my name, representing H.G. Fischer and Company, Diathermy, Sinusoidal and Ultra-Violet Ray apparatus.

Assuming you have read various articles on treating with the Diathermy Current, I might say Diathermy means heating through and through by means of a rapidly oscillating electrical current producing a local elevation of the temperature in the tissues, and with this current you can sedate, you can stimulate, or you can destroy tissues.

Stimulative Diathermy for fractures or breaks. Sedative Diathermy for relieving pain or reducing inflammation. Destructive Diathermy ("also known as Electro-coagulation) for removal of Hemorrhoids, stumps of tonsils, and is used only where the field is accessible and visible.

No doubt, Doctor, at some time or other, you have wished for some form of physiotherapy equipment to use right here in your office. Take, for instance, a stubborn case of High Blood Pressure. You give a treatment known as Auto-Condensation, the patient reclining on a leatherette cushion attached to the machine by means of a flexible, well-insulated, rubber cord, and a piece of steel tubing resting in the hands which is also attached to the machine. Turn on the current, gradually stopping it up until the meter on the machine reads 500 milliamperes. What is the result? A slight drop of the blood pressure, assisting the pores to unload the toxins, dilating the arteries, producing a more freely flowing arterial Hyperemia. And a good suggestion to your patient, Doctor, is to advise them to drink plenty of water during the course of treatments. This helps elimination and they should try to keep bowels moving daily.

Now let us assume the patient complains of dizziness. That's a sign the patient was getting too strong a current and that's why we have the meter for you as a guide. For instance, I called on a doctor the other day and he invited me to come in and watch him give an auto-condensation treatment. The meter was registering 1000 milliamperes, and you know when the treatment was finished the patient sat up and said, "Funny thing, Doctor, I see two of you." So you see, Doctor, the machine is potential.

Just the other day I met a Doctor from Kalamazoo, Mich. more than pleased with his apparatus. I remember now he was telling me he cured a number of cases of chronic Bronchitis. That's what he said - "cured". By the way, he has a Diathermy outfit, a Sun Lamp, and Sinusoidal equipment.

J. A. ANDERSON

The treatment for Bronchitis, Doctor. Take a large piece of block tin and place under the patient's back, and a piece of 4x7 on the front. It may take two or three treatments; possibly six or eight. At any rate, you will surprise yourself. And just think what a walking advertisement this patient will be for you! Naturally his friends are going to ask how he is, etc., etc., and he, of course, is going to tell them how Dr. Smith fixed him up - Yes sir, Doctor.

I presume we are all alike, we are all anxious to go ahead and keep on increasing our income and what's the result? You know, our families are more comfortable, happier, and so on.

Doctor, as you go along using Diathermy apparatus in your practice you will feel like so many men. I know "it's a valuable adjunct", and if it were the last machine you couldn't buy it at any price. Some men say, "Mr. Anderson, I am and always have been a little slow to take up these things, but if you are willing to show me how to use this apparatus, I believe I shall ask you to send one up. If such men as Crile or Mayo Brothers and different men I have read about use them, I am open minded enough to try it, too".

Doctor, I am going to send you a machine, instruct you in its use, and if there is anything you are not sure of, remember, I am always ready to serve you and perhaps you would remember me with the name of prospective friends or some friendly competitor.

Our obligation starts when we do business with you. For instance here - here's a magazine sent to you every month; here's an article by Dr. Blank, how he treated an old chronic Gonorrhreal prostate; also one by Dr. --- Coagulation of Hemorrhoids, and the Technique.

I shall see you then, let's see, this is Monday - see you Friday. Or is Monday a better day? All right, Doctor, goodbye.

J. A. Anderson.

Chicago, Ill.
April 30, 1926.

M. C. H U N T

Mr. A. W. Mathis, Mgr.,
 H. G. Fischer & Co.,
 Chicago, Ill.

Dear Mr. Mathis:

Answering your letter of April 20th, concerning the volume "ACTUAL FACTS AND METHODS WHICH HAVE PRODUCED SALES". I am heartily in favor with this idea as I am sure it will prove of tremendous value to us all.

"There are a number of techniques which I use in selling machines as I find that no one technique will sell all doctors. I use the technique which I think best fits the practice of the man I am trying to sell. If I am calling on a surgeon I use Surgical Diathermy in carcinoma and in other foreign growths, also, post-operative condition. If I am calling on an eye, ear, nose and throat man, I give technique within that range. To a "GU" man I give "GU" technique, etc.

However, as you probably know, I have two pet techniques to which I attribute a great majority of my Diathermy sales. Namely, tonsil and hemorrhoidal coagulation. I find that these especially go over big with the general practitioner who is referring most of his surgery to a surgeon. These men most all have ambitions to do surgery and the simplicity of coagulation offers a way for them to realize this ambition; also, the fees that this class of doctor receives, mostly outside of obstetrical cases, range from \$2.00 to \$5.00 while a charge of \$35.00 to \$100.00 fees can be made for a tonsil or hemorrhoidal operation. This does not displease him in the least.

I present the technique to my prospective customers in the following manner:

"Dr. Blank, you have no doubt heard of the success Dr. Elmer, of Chicago, is having with the coagulation of diseased tonsils with Surgical Diathermy. This Doctor has successfully handled over one thousand pair of tonsils by coagulation and the end results are fine."

The technique is very simple and the cases can be handled right in your own office. It is done under a local anesthetic and the patient feels absolutely no pain, also, they are not incapacitated and can continue right at their work without any loss of time. This is naturally a big saving to your patient and you will get a number of cases that you would otherwise not get as they cannot afford to lose time from their work. They also save the expense of a hospital bill.

M. C. H U N T

For an anesthetic $\frac{1}{2}$ of 1% butyn or 2% novocain is used. It is best generally to swab the throat and tongue with a 10% solution of cocaine to reduce the gagging, then inject the tonsil at three points, once in the upper pole behind the tonsil, once in the lower pole and once in the center, being careful to go in behind the anterior pillar and not through it as this prevents some swelling.

After both tonsils have been thoroughly deadened we place a metal electrode, about 6" x 8", on the patients back putting a pillow on the back of the chair so the patient can lean back against it to hold the electrode snugly against the back. This is the indifferent electrode. We use a special needle, which is furnished with the machine, as the active electrode.

To determine the depth to which you wish to coagulate, if you will retract the anterior pillar you can generally determine the approximate thickness of the tonsil. We then bend the needle at about a 45 degree angle at a distance from the point of a little less than the thickness of the tonsil.

After our machine is set up for Surgical Diathermy and the foot switch is connected so that we may operate the machine with our foot, we proceed to insert the needle in the tonsil and step on the foot switch to turn the current on. As soon as the tonsil turns white around the needle, which is generally about five seconds, we let our foot up off of the foot switch which turns off the machine then the needle is taken out and inserted in another place in the tonsil and the machine again turned on. We continue this process until the entire tonsil is white, then repeat the technique in the other tonsil and the operation is completed. It generally takes from five to seven insertions of the needle in each tonsil to turn them white. The entire operation can easily be done in from fifteen to twenty minutes.

The patient should gargle a mild solution of Epsom Salts four or five times a day to relieve the soreness and keep the throat clean. With this technique there is no danger of an infection of the throat or of a bleeder like there would be if a knife were used.

The treatment of hemorrhoids is equally as simple as that of tonsils. They can also be handled in your office under a local anesthetic and with very little pain to the patient.

M. C. H U N T

The same solution is used for injection as that employed in tonsils. The patient should be laid on their left side with the left leg extended and the right leg in the knee chest position. Two strips of two inch adhesive tape about eight inches long is placed on each side of the buttock to hold the cheeks apart and better expose the working ground.

The subcutaneous tissue is first injected then a long needle is employed and the sphincter is injected entirely around the anus, same is then dilated. This dilation can be done with dilating cones that can be used on this machine. After this the hemorrhoid will be well exposed. Then inject a little behind each individual hemorrhoid. We next place a 6" x 8" electrode underneath the patient which, as in our tonsil technique, acts as an indifferent electrode. We single out one hemorrhoid and clamp off same with a very light hemostat or forceps, taking care to use one that does not pinch the mucus-membrane. We next insert into the pile the operating needle, which is furnished with the outfit, parallel with the hemostat and about 1/8" above same, then by stepping on the foot switch we turn on the current and leave it on until the pile turns a greenish-yellow, but not until it turns white. In this way we destroy the vein but do not destroy the mucus-membrane, therefore, we get an absorption of the vein instead of a sluff of the mucus-membrane. This cuts the soreness to a minimum and eliminates after pain. Each pile is treated individually in this manner, all being done at one setting.

After the operation a 2% opiate rectal suppository is inserted. This is merely a safeguard. Three or four of these suppositories should be given the patient so that they can insert one in case they experience any uncomfortable feeling in that area for twenty-four or thirty-six hours after the operation.

In most all cases the patient can go back to work the day following the operation and they can always walk out of your office and go home without any assistance.

Doctors doing this class of work are charging from \$50.00 to \$100.00 for the operation and are building a big practice on these cases as it is 100% more satisfactory to the patient than cutting. The satisfaction you will derive from being able to take care of these cases in a manner so satisfactory

M. C. H U N T

to your patients will more than repay you for the expense of the machine, not considering the amount it will increase your income by being able to take care of these cases right in your own office."

If you wish to smooth out the above technique in any way you have my permission to do so. I hope you will find the above technique of interest.

Cordially yours,

M. C. HUNT.

Detroit, Michigan
April 26, 1926.

H. H. H O L Z E R

The treatment of acute gonorrhea and its complications in the male with diathermy is a very interesting subject to about seventy-five percent of the general practitioners, and when I find a doctor at the outset the least bit interested in the subject I lay stress on the following technique and sales talk.

None will disagree with you when you mention the fact that Dr. Geo. W. Funck of Chicago, who has practiced medicine for the past twenty-seven years, says that the same medicines available in those times are available today and also used, with a few changes in their trade names, and the only step forward in the treatment of acute gonorrhea has been with diathermy, the medicinal therapy results ranging from three weeks to four months, where in diathermy results are received in from three to ten treatments.

At this time in my sales talk I make sure that the doctor is familiar with the fundamental principles of diathermy which makes your explanation of the technique very simple. My next step is to show a few papers by Drs. Funck, Corbus and O'Connor with reference to clinical findings as to the amount of heat necessary to destroy the G. C. germs, which is 104°F in thirty minutes and between 108° and 110°F . instantly.

In a patient presenting himself during the first seventy-two hours of an acute infection the following method is employed.

The patient sitting on the indifferent electrode about ten by twelve inches. No soap is necessary. The active electrode being an ordinary drinking glass with a piece of block tin two inches wide and the depth of the glass and across the bottom. About an inch of the block tin is outside of the glass fastened with a rubber band and where connection is made. The glass is filled with water and salt added making a saline solution and then the penus is immersed just a trifle past the meatus. If you are demonstrating a type G machine care should be taken as to the setting of the rheostat, which is on button five and the three spark gaps closed very tight. The low voltage tap is used and then only one point of the spark gap turned very little which insures practically no sparking in the glass if perchance the penus should come out of the water. A patient with exceptionally long hair surrounding the penus may complain of a pricking sensation and in that event place a towel against the hair and slip the ends underneath the thighs. The tolerance of the patient will range between 250 and 350 M. and

H. H. HOLZER

treatments should be given in thirty minute periods as holding the glass for over that period is usually very tiresome to patient.

Here your talking points are that the doctor may give two or three treatments a day for quicker results, he naturally being compensated sufficiently and especially if his patient is a married man and must get a quick result. In demonstrating the senior machines the rheostat setting is on point nine or ten and spark gap entirely closed using the master control open just a trifle. Here I show the doctor where the patient after his first treatment regulates his own tolerance and practically takes care of his own treatment and he may interview other patients without the loss of but a few moments, the time it takes in getting his patient set in position.

In gonorrhreal complications, such as sub-acute and chronic, I demonstrate the use of the Corbus Thermophore, Electrode, and in prostatic or seminal vesicul involvements, the prostatic electrode. A specific in gonorrhreal epididymitis.

In conclusion along these lines I find it a very good point to impound the personal service I will render him after he has our outfit and not expect the doctor to work out his own destiny as is the case with most of our competitors. If the question arises as to his being able to procure some similar equipment through other channels I lay stress to the fact that the outfit would be practically worthless to him inasmuch as he would receive no demonstration or service.

H. H. HOLZER.

Chicago, Ill.
April 30, 1926.

R. B. M U R R A Y

Doctor, I represent the H. G. Fischer Co., manufacturers of physiotherapy equipment. I have called upon you, Doctor, in answer to your request for literature, hoping that I may be of assistance to you. I hope that you have found the literature interesting.

Of course, Doctor, you appreciate the value of heat as a modality. Heat is nothing that is new to your profession, because you have used different forms of it in your practice. If heat that is merely superficial is of benefit, what can be done with a form of heat that can be induced into the tissues themselves, heat that can be regulated, and always under control.

Diathermy, Doctor, means internal heat, internal heat induced into the tissues themselves. You can place this heat to the affected part and your patient receives no burning or blistering; all that he feels is a nice comfortable heat.

Now, Doctor, let me illustrate the use of Diathermy in a disease that you meet with in your general practice. We will say that your patient has Arthritis in the joint of the knee. Now you know that heat can be used there. Superficial heat would help but if you can induce the heat to the very tissues themselves, would not it be better? You can do it with diathermy, Doctor.

Here's the effect that internal heat has caused in the affected part: This heat causes a marked increase of blood circulation through the part with an increase of nourishment and tone. Increased blood circulation, increased temperature by virtue of its increased chemical activity and increased absorptive powers, cause a marked absorption of the deposits in the joint. This condition to a lesser degree persists for a few hours following the treatment, so what is virtually caused is an increased temperature, increased absorption of foreign matter for a period of two or more hours per treatment. The beauty of the whole thing is that your patient begins to feel relief even after his first treatment and is anxious to come back for more.

He is bound to tell his friends, which means good advertising for you.

Your treatments that you give are all here in

R. B. M U R R A Y

your office, the place that you like to work best. You are able to hold your patient and to diagnose your case more thoroughly. Because diathermy relieves pain, your patient is willing to stay with you and this allows you to get results.

Here, Doctor, are two types of Diathermy apparatus, both are excellent machines and it is a matter of choice of which one you will select. As your office is small, I would advise you to buy the portable type.

ROY B. MURRAY.

Attleboro, Mass.
May 3, 1926.

F R E D T O E N N I G

Dear Mr. Mathis:

I include two forms of calls I make. However, I will say that I never have a certain formula. I size each man the way I find him. I always classify my men: will say classify them in four classes.

#1. The Busy Practitioner. This is the best man to get. As a rule he buys for cash, and buys several modalities.

#2. The Older Doctor, who would like to build up an Office Practice. This is a good man to go after.

#3. The Four Flusher. Will tell you he only does Surgery, and has no time for different work. I might see him again in six months.

#4. The Young Doctor. Just starting: as a rule he has no money, so don't waste too much time.

Case #1. Too busy Doctors.

Doctor: I am glad to meet you. I have been trying for several months to see you, but on several calls I found too many Patients ahead of me.

"Doctor." What can I do for you, and what is on your mind. Take a seat please!"

Dr. My name is T. from the H. G. Fischer Company. A friend of yours, Dr. S., tells me that you would be interested in Electro Physiotherapy especially in Diathermy. I sold to Dr. S. the Outfit, and the Doctor is doing well. He finds it a great help in his practice.

"Doctor." Yes, I know Dr. S. We are classmates, but

F R E D T O E N N I G

I never told him that I wanted to buy anything. I don't know much about Electro Physiotherapy. I think there is a field for it, but I haven't the time - it takes too much time!

Dr. I agree with you. I notice that you are very busy. What you need is an Assistant or a good Nurse. You have plenty room. Why not install a Diathermy and a Quartz Lamp. Doctor, I have sold to several very busy Doctors; the busy man has more use for our modalities than the men who are waiting for patients. I have taught many nurses the use of our equipment. Doctor you need Diathermy every day, also you could use the Ultra-Violet Rays every day. You know Diathermy gives you the heat where you want it; all the heat your patient can stand in comfort is at your command by simply moving the lever on the Rheostat. I think you have several cases right now where medicine is of little value, and where Diathermy or the Actinic Rays would do much good. Remember if your patient is given Electro Treatment he must call three to four times per week, and in some cases every day if possible. Figure yourself what this means. I know you are making money, but you could easily double your office earnings, and at the same time do more good to your patients. Heat will eliminate pain and increase blood supply. There is absolutely no danger to the patient, and if correctly applied no harm can be done. Therefore, all Medical Diathermy can successfully be applied by your Assistant.

Then there is Surgical Diathermy, which of course you will do yourself. A number of Doctors are coagulating tonsils and hemorrhoids, moles, warts and tumors. This is all done at your office under local anesthetic. It is not painful to the patient, and no danger of a hemorrhage. Diathermy has taken the field of the cautery in removing certain growths of the body. When you coagulate you connect your patient with one electrode. The other electrode needle you hold in your hand, and you control the machine by the use of the foot switch. By regulating your Spark Gap you regulate your current; mild or strong, and a little practice soon will teach you the right amount of current you want. In a short time you will have developed your own technic. You start and stop by the use of the foot switch. There is no hurry, and in the case of coagulating tonsils, if you should find that there is yet some to be removed, you can do so later.

F R E D T O E N N I G

Surgical Diathermy pays well, and many patients will like this method better - besides, it saves them the Hospital expense. Your assistant soon will be in a position to make money for you by giving the Medical Diathermy.

Autocondensation Treatment and Light Treatment: these will give you more time for your work.

Doctor, we give a 5% cash discount, or sell if you want one One-third down after installation, and balance in 10 notes.

May I have your order now?

#2. Call on Doctor of middle age.

Dear Doctor. My name is Toennig from the H. G. Fischer Company. You no doubt have received some of our circulars regarding Diathermy and other Physiotherapeutic Equipments.

"Doctor." Yes, I have received several booklets and circulars from different firms that are about all the same, but I don't know anything about Electric treatment. I know some Doctors are using it. I think I am too old to learn a new method. "What is Diathermy anyway?"

Doctor, Diathermy is the most modern and best Modality furnished through the High Frequency Current. You can use it with absolute safety. You can learn to use it in a few hours, and by using it you can build up considerably your office practice and increase your income. By installing Electro Therapy you are going into a new field of Medicine, and you will be surprised how your patients adapt themselves to this treatment. They certainly will like it better than only medicine. In the first place, your patients feel and notice that you are doing something for them; they are feeling in many cases instant relief, especially where there is pain, because Diathermy is nothing but heat furnished by the high frequency current. What heat will do I don't need to tell you. You know it increases the blood supply. If you apply a Metal Electrode below the knee, and a second Metal Electrode above the knee on opposite side of leg, by turning on the current you will get the most heat in the knee joint. This applies to all treatment with Diathermy; by using two Metal Electrodes one will be positive, the other negative. Medical Diathermy is used in cases like Pneumonia,

F R E D T O E N N I G

Lumbago, Pleurisy and Inflammation - in fact in all cases where there is pain, because the heat will give relief.

Remember, you always have this heat under your control on any part of the body. By moving a Rheostat you increase or decrease the heat. As a rule we give the patient all the heat he can stand in comfort. Diathermy is a great help in G. U. cases, and if properly applied it will reduce the time of treatment to about one-third of the older method, and by doing this you certainly make a friend of your patient. In cases of Gonorrhea you must use injection. In fact in all cases I want you to follow your regular technique: use medicine wherever it is needed. Diathermy alone don't cure - it is only your assistant. Doctor, many larger Industrial Insurance Companies insist on the use of Diathermy and other Electro Modalities in their contract. The day of plain prescription is nearly gone, the patients flocking to the Chiropractors, Osteopaths and Naprapaths, and other healers. Now if you install some Electro Modalities you will get many of this class of patients which at present support such healers, and I assure you that you will never be without some Apparatus after you have once started. There is no better investment for any Physician today than the installment of Electro Physiotherapy. It is the only investment you can control.

1. It increases business.
2. It delivers the goods.
3. It increases your income.

After you are acquainted better with your Apparatus you start Surgical Diathermy, and then you are making money. By Coagulation of tonsils, hemorrhoids, moles, warts, tumors, all this you do at your office. The technique of coagulation is very simple: I can show you the method of several very successful good men. By doing this operation at your office, you are saving your patient some money, and make some for yourself.

What you say, Doctor? When can I send you one?

FRED TOENNIG.

Chicago, Ill.
May 15, 1926.

F. G. T R A U T M A N

1. Whenever I arrive at a town or city, I get a telephone book or City Directory (if possible) to make an alphabetical list of the names of all physicians, given as follows:
 1. Full name
 2. Full address (As to office and residence)
 3. Telephone number
2. Next I find somebody (usually a druggist) who is willing to help me go over the list of names for the following:
 1. Specialty of physician.
 2. Prominence of the physician among the public.
 3. Stand of the physician among his professional comrades.
 4. If he is conservative or more modern in his professional thinking.
 5. His financial standing (Often I get this information from the bank).

With this knowledge I go from office to office (I take no hand bag with me to give the impression that I am a salesman, because if I appear as a salesman I have a hell of a time getting admittance). Often the Doctor has an office girl. She takes the names of the patients as they come in, hence I am a patient. In case Doctor has no office girl, he usually opens the door, and asks: "Who is the next?" As a golden rule, I am watching my turn. Whenever I am admitted, I make this apology: "Pardon me, Doctor, I am a representative of the H. G. Fischer Company (handing him my card). I know, Doctor, your time is valuable, and I don't want to take the time of your patients, so I am asking for a convenient hour and the privilege of coming again to discuss the unlimited possibilities of a diathermy machine in the medical profession. It is understood, Doctor, that you are under no obligation. I am promising not to ask you to buy Diathermy equipment. It will take me about ten minutes to tell you what you can do with a diathermy machine and 15 minutes for what you can't do".

Nine times out of ten my good Doctor laughs about my statement and says: "Alright, Fischer, if you keep your promise not to ask me to buy one of these 'quacker machines', I am willing to give you a chance at 5 o'clock P.M. Will that suit you?" At this point I am turning towards the door; before I leave, I take the chance of giving thanks for his thoughtfulness.

F. G. T R A U T M A N

The next day I appear with my hand bag, and just as soon as I am admitted I begin in this manner. The doctor is usually sitting in his chair while I am standing, looking him straight between his eye-brows until he drops his head. I do this because the doctor as a rule gazes at me with a somewhat sarcastic look, as though he is telling me I am a fool. By looking straight between his eyebrows, I am converting his negative views into positive, and he is ready to listen to what I have to say. Nine times out of ten the Doctor will not interrupt me but he is taking in all I tell him. Just as soon as he drops his head, I continue: "Dr., no doubt you are reading the A.M.A. Journal and you notice over and over articles dealing with diathermy. By diathermy we mean the latest development and the only method known by which we are able to generate heat within the tissues of the human body, and within any physiological limits. The heat is produced by the resistance of the tissues to the passage of a very highly oscillating current. The heat may be gauged and regulated within any degree. Therefore, you are able to administer heat in definite dosage, etc., etc."

After I have told him what he can do and what he can't do with a diathermy machine, I conclude with these remarks: "Now, Dr., we don't claim to have a panacea, but we do claim that 85% of all your patients are amenable for diathermy, and again we do claim that a diathermy machine is an indispensable armamentarium in the modern medical profession. We don't ask you to invest money in a H.G. Fischer diathermical equipment, because the equipment will pay for itself within six months. If you only give one treatment per day in six months, you will have \$432.00, and in case you count 50% of this amount as charity the machine is still paying for itself. Dr. you will not only give one treatment per day, but within 30 days you will give 4 to 5 treatments. Profit is gained by increased business following as a natural result of results achieved."

At this moment my physician becomes uneasy. He is moving about in his chair. Seemingly his lips are moving, he is anxious to ask questions. But I don't give him a chance, all he wants is to ask questions in the "form of objection." He sees that he is beaten, hence he is battling within himself for relief. And often I continue:

"Dr., "A Fischer Diathermy Machine" brings patients to your office, where you can naturally give them

F. G. T R A U T M A N

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F. G. T R A U T M A N

far better attention. By conservation thus achieved, it enables you to handle more patients. It enables you to establish regular hours by definite appointments made in advance, thus utilizing the time otherwise dissipated in calls from point to point in wide intervals. An equipment of this character is an investment, not an expense. It speedily replaces the outlay required to get it and thereafter nets clear profit, profit that never would have been earned without it. No doubt you know, Dr. M.... at the Wallace Bldg., Greenville, S. C., according to the bookkeeping of his office girl, he cashed in over \$5,000 the last two years. Dr. S.... in the same building, bought a Portable type just 11 months ago,- today he claims that he paid for it, and bought himself a Buick for \$1800.00, and again installed an Alpine Lamp for \$470.00. Did it Pay? Dr. W.... in Spartansburg, S. C., cashed in the first 12 days \$105.25, money which he consciously claims he couldn't have earned without the equipment. Did it pay him?"

Right here, I make a break, putting together the displayed photographs, my note book, etc., while making another apology for staying longer than ten minutes, when the doctor begins to ask questions. As a rule I object to answer any of them, telling him I don't have the time to answer any questions just now, as I have another appointment, but would be delighted to make another appointment to answer all his questions. If I do stay and answer the questions "THE SALE IS LOST", because his questions are negative, and I have to work AGAINST THE STREAM. But if I leave him literature and make another visit his questions are of a different type. The privilege to come back to answer and discuss questions is always granted.

At my second interview the Doctor asks the questions while I am giving the answers as good as I can. The questions are usually questions of common sense. And after a long interview we are not only discussing diathermy, but other subjects of interest. Before I leave the Doctor, I ask him for his permission to demonstrate a diathermy machine. As we are very friendly and I again promise him that I will not ask him to buy the machine, this request is always granted. I further ask the Doctor to produce patients as I would like to treat any of them. He is always

F. G. T R A U T M A N

glad to have some of his patients treated for nothing, while he collects the fee.

After the demonstration and treatment of the patients, the Doctor begins to ask questions about the prices and terms. Whenever he asks for prices and terms, I hold the order blank in my left hand in my left coat-pocket. I am always ready for that excitement, Bah!

Here are a few principles I NEVER transgress:

1. Never tell a lie.
2. Never push a sale. The Doctor has to tell me he wants a machine.
3. Never permit a Doctor to have H. G. Fischer equipment if he feels that the equipment is not satisfactory.
4. Never create an enemy.
5. Never do anything that might in any way reflect on my business.
6. Never be dishonest.

F. G. Trautman.

Greenville, S. C.
May 12, 1926.

A. L. WERNER

In selling Fischer Physio Therapy equipment I do not employ any particular method to procure orders.

First, I canvass all the doctors if in a small town, and a sufficient number of medical men in larger towns. I introduce myself and state what firm I represent and what goods I sell. I do not at first mention selling, nor price, not until the doctor is sufficiently interested in my equipment.

I judge then which of them is mostly interested in Diathermy and worth while going after first. I try then to interest them still more and work for a chance to make a demonstration, using one of the doctor's patients who is afflicted with a condition for which Diathermy is indicated. During this time I find out what standing the Doctor has in his community, his financial status and reliability. I do this so as not to waste any unnecessary time on a man who has no means of paying for goods after they are sold to him.

It takes a great deal of serious talk to convince the doctor that Diathermy is of value in most, and a specific in certain conditions. After convincing a doctor, by demonstration, of the great help Diathermy is, and will prove to be, in his practice both as to therapeutic value as well as financial, the Doctor is usually ready to listen to giving an order.

Quite a number of medical men I find are not in a position financially to give an order, even if satisfied of the value of Diathermy and with the apparatus. Such prospects I reserve for future calls.

I find in my territory considerable Physiotherapy equipment, which was sold but no instruction and service given. To such men I offer my services, in many cases giving instructions in the use of the apparatus.

While this means a lot of additional work, it offers a chance to make an acquaintance with a doctor and gain his confidence, which can be made use of in the future, and in several instances resulted in orders for additional supplies, electrodes, etc.

A. L. W E R N E R

I have no set way of talking, as experience has shown me that about every other man requires different talk and approach. As I see it, it is of the utmost importance to get a Doctor's confidence, and I think I am safe in stating that once I have his confidence I will sooner or later get an order from him.

I never tell a doctor his business, how he should work, but I do insist on telling him how our apparatus must be used to obtain the best results.

A. L. WERNER.

Chicago, Ill.
May 14, 1926.

L. A. CONNORS

Mr. A. W. Mathis,
Director of Sales,
H. G. Fischer & Co.,
Chicago, Ill.

Dear Mr. Mathis:

Complying with your letter of April 20th, regarding "Actual Facts and Methods which have Produced Sales."

I find the following technic employed in the treatment of Acute Gonorrhea explained thoroughly to the doctor has helped me considerably in holding the doctor's attention and he will undoubtedly warm up to you.

"We have found that Acute Gonorrhea in the male can be treated successfully with Diathermy - in most cases we can clear up the condition in from 6 to 10 treatments. We employ a glass electrode filled with saline solution which has a small metal disc attached to bottom of glass, which serves as our active electrode, one wire from our machine hooked to this electrode, another wire from our indifferent pole hooked to a large electrode in one hand; immerse the head of the penis in the saline solution; we then turn on the machine very slowly until we get a reading of 250 M.A. on our meter, which will be about all our patient will stand.

If we were to insert a thermometer in the Urethra we would find a temperature between 104 and 110 degrees. We know that the G. C. bug thrives best at body temperature, and will die at a temperature over 105 so you can readily see, doctor, that by raising the temperature to 107 or 110 degrees and holding it there for a period of 20 or 30 minutes we actually kill the bug. Those cases we treat every day and I know the results you will get will be very satisfactory.

As you know, most of those cases run along over a period of six to eight weeks, sometimes being very discouraging to the patient and also to you."

Here I proceed to close in the following manner:

"I will send you one of our machines day after tomorrow and will teach you thoroughly how to treat some of your cases."

I have my order book ready and ask him for his first

L. A. C O N N O R

initial, if he tells me I proceed by making out the order, asking him to place his name on this line which I have marked "X".

If this does not go over I immediately tell him the technic of Chronic Prostatitis and try to close him again.

I hope this letter covers what you have asked and if you see fit to brush it up a little I would be glad if you would do so.

Cordially yours,

L. A. CONNORS.

Detroit, Mich.
April 25, 1926.

H. W. W A D E

Sales Help?

Unfortunately just at this time I am unable to speak of any good way to make sales or to mention any good helps in making sales, but I can at least contribute by saying what it takes to fail to make sales.

I have found after a long experience that it is easier to get into a habit of doing things that fail to make sales than it is to form good selling habits. I have also found that nearly every sale is made in a different way, or closed up by a different kind of a demonstration or talk. The substance of the talk or demonstrations, of course, is the same in many instances but each sale has a little feature of its own. For instance, Dr. Smith buys because his competitor Brown did; Dr. Jones buys because it is recommended by nationally known people like Dr. Young. But these two features possibly would not mean anything to Dr. White; his soft spot has to be found and used.

The things that fail to make sales, especially when you are selling a thing that is to be used, are too numerous to mention in short articles, but the main ones in physiotherapy equipment sales have passed before me in a short experience and I am glad of an opportunity to pass along my experiences for the benefit of others.

First -- the big mistake: When making a demonstration, make it snappy and short as possible. If it is slow the Doctor will say that it takes too much time to use it.

Second -- Do not recommend the outfit for too many things. Find his specialty, or a point to interest him and expatiate and elaborate on this one point. Drive home one "Home Run", - it counts more than a dozen "Pop ups".

Third -- Never demonstrate on a chronic who is at the time, free from pain. If you do the Doctor will want demonstrations until you get end results. Demonstration on a subject who is in pain and relief of the pain gives you the opening for a close.

Fourth -- Never leave an office without leaving your address. I now have two good prospects who called me up on the phone after practically asking me to leave the office and not come back. One telegraphed in an order because he did not know where to find me.

H. W. W A D E

Fifth -- Do not get into arguments with your victim. He knows all and you only know your line. Don't tell him what you know, tell him what Dr. Penutski says, and show him Penutski's statement.

Sixth -- Don't give up. Seventeen calls on one Dr. before you sell him is just as good as seventeen calls on different ones with only one sale.

H. W. WADE.

Nashville, Tenn.
April 26, 1926.

C U R T I S C. M O N T E I T H

Mr. A. W. Mathis,
H. G. Fischer & Co., Inc.,
Chicago, Ill.

Dear Mr. Mathis:

This is in reply to your letter of April 20. Owing to the fact that I am a new man with the H. G. Fischer Co. and everything I have learned has been from the older men, I probably cannot tell you anything new in my method of selling. However, I will outline the facts that have produced most of my sales.

In my approach I attempt to get across to the doctor that I have something that means dollars and cents to him. Of course they have all heard of the Diathermy and Alpine Lamp, and after talking the merits of the machine from a medical standpoint, for a little while, I attempt to draw out of him a question pertaining to the cost of the machine or the cost of operating it. I immediately switch to the commercial basis and state to him that owing to the fact that he asked in regard to the price, that gets us down to talking the commercial value. As long as he has opened up on that basis, I can talk just as much and just as hard as I care to without offending him. In most instances I qualify him. I ask him if I can show him a proposition that will be a good investment and mean dollars and cents to him, would he be interested? To which, of course, there is only one answer. Then I proceed, and it is not a hard proposition to show him where his investment of physiotherapy equipment over a period of two years will show him a much larger return than any of the investments he now holds.

I have been able, lately, to interest a number of doctors, who were rather against Diathermy by giving them a technique that I got from Dr. Mel. Waggoner in treating chronic joints and back conditions. That is by using Diathermy in conjunction with intravenous injections, for instance, take an old gonorrhreal knee. Apply your electrode to the knee, let the Diathermy run about ten minutes to produce local Hyperemia, then take the intravenous injection and center it, the Diathermy treatment should last about ten minutes after injection.

C U R T I S C. M O N T E I T H

But, I have found in my selling, that the surest way of getting orders is on the commercial basis and all the talk, I can do on technic, etc., while it helps get interest and is of value, unless I can offer something concrete by the way of returns, it is hard to get the signature on the dotted line.

This method is probably not at all new, but it is the method I am using to get what results I have and certainly will be glad if I can get any other ideas that will help me put across more sales.

Trusting this information is satisfactory, I remain

Yours very truly,

CURTIS C. MONTEITH.

St. Paul, Minn.
April 29, 1926.

H. L. MC GASKILL

Dear Mr. Mathis:

Complying with your request for some sales points or technique, am writing out two which I hope will be of some help. Also, I shall look forward with keen interest to receiving the folder compiled from the various letters sent in.

First: Ionization with the Galvanic current. This is easy to visualize to the Doctor in the following manner: Get an ordinary saucer and place in it the white of an egg, then use a strip of copper - a ground clamp purchased from a Radio store makes a nice one - as the electrode on the positive wire. Complete the circuit by using an ordinary piece of block tin as the electrode on the negative wire. Place the ends of both electrodes so that they are immersed in the white of egg, with a distance of two or three inches in between. Start the machine and in a little while you will see the copper being driven off from the positive pole. Furthermore, we have a simple rule to guide us by - testing with Litmus paper any discharge - if Litmus test shows alkaline, use positive pole with weak solution of Copper Sulphate. If Litmus test shows acid use negative pole with Daiken's Solution 2%.

Pliability of Fischer D'Arsonval current to meet all conditions needed in coagulation work. That is we have four outlets (outlet #1 upper post handle down - outlet #2 upper post handle up - outlet #3 lower post handle down - outlet #4 lower post handle up) to give a pre-determined milliamperage reading but with different voltages in each case. For example, if we want to coagulate an enlarged tonsil we might use outlet #1 so that we have a good sized jump spark and 1800 meter reading. A submerged type of tonsil, a small jump spark and 1800 meter reading outlet #4. This varying of the voltage, or jump spark, is necessary to meet all conditions in that our depth of coagulation is exactly equivalent to the distance the spark will jump. Thus in the two different types of tonsils as outlined above we have an absolute need for greater depth of penetration in the enlarged type, than in the submerged type. In order to make these variations clear and vivid to the doctor I have four test tubes of the same size filled with two contrasting colored liquids - blueing in water for blue color and any heavy red oil for red color - which won't mix, varying the two colored liquids to correspond to the variation of milliamperage and voltage as obtained in each of the four outlets. I then operate the machine to obtain 1000 Millamps outlet #1 and note jump spark (voltage) on direct short to meter which corresponds to tube #1, then without moving

H. L. McCASKILL

setting of machine, but throwing switch, I have current from outlet #2 which gives me a higher meter reading but a shorter jump spark which corresponds to tube #2 and so on for outlets #3 and #4 and tubes #3 and #4. This combination demonstration helps the doctor to realize that when we raise the milliamperage we have less voltage and vice versa just as he SEES the same amount of liquids in each test tube and likewise SEES that when we have more blue in one we have less red in the other and vice versa.

McCaskill.

Shreveport, La.
April 22, 1936.

M. YUDIN

H. G. Fischer & Co., Inc.,
Chicago, Ill.

Mr. A. W. Mathis,

Dear Sir:-

Regarding your letter, "Actual Facts and Methods which Have Produced Sales", I hereby submit the following Physiological and Surgical uses for Diathermy, which, I believe, in a great measure were exceedingly helpful in interesting physicians and surgeons in Diathermy.

PHYSIOLOGICAL VALUE

What good, Doctor, is your Soda Salicylate or Syncophine in Rheumatism, where there is a stasis or your iodides in Epididymitis where there is poor or faulty circulation? After all, your medication is conveyed to pathological areas via the blood stream. Is it not practical and better to break up this stasis with internal heat which you can produce with diathermy, thus spurring your vaccines or medications on to increased activity? In the past, where you had superficial pathology you suggested to your patients to go home and apply a hot water bag or an electric pad on their condition. In deep seated pathology today you can supply them with heat through the diathermy apparatus, wherever heat is indicated, and if the patient does not get this deep heat from you, Doctor, where is he going to get it? You would not think of taking a horse and buggy to go to Cleveland today, Doctor? We're living in a progressive age, you have an agent today which is an exceedingly good and indispensable modality in diathermy where you want to break up calcareous deposits and stasis. Heat can be concentrated at precisely any area in the body and the degree of temperature modified at that focal point making for either a sedative or stimulative treatment as desired.

SURGICAL VALUE

Regarding hemorrhoids. Doctor, you know that cautery leaves a thin smooth sealed wall subject to rupture and hemorrhages and are also subject to colon infection. With phenol or any acid one cannot guide the area of destruction and sloughing ensues. Now with electro-coagulation you can guide your area of destruction in as much as one can place the needle over the opposite terminal and arrange your spark gap area whether it be an eighth, sixteenth, or thirty-second of an inch, which will be equivalent to the depth of destruction.

M. YUDIN

So that when you insert your needle in a hemorrhoid or any formation for coagulation, you know spherically just the area of destruction you are going to get. Thus sloughing can be prevented. You set up a thick sealed wall so there is not your chance for rupture and hemorrhage or infection. Trauma is in a great measure minimized. The operation is done ambulatory, saving the patient time away from his business. He is not tormented by the general anesthetic with its possible complications, avoiding the trouble of catheterization due to the insertion of the rectal tube which presses upon the uretha. This takes place in seven out of every ten hemorrhoidectomies. The patient saves the expense of the operating room, the hospital, and in many cases a special nurse's fee. So that you save the patient money, doctor, and also make it more remunerative for the time you put in. And then, Doctor, you can visualize what an asset it is to you when one of your patients (a merchant running some small business such as a grocery store, etc.) comes to your office afflicted with a case of hemorrhoids and hospitalization would necessarily mean closing his business which he could not very well afford. The fact you've treated his wife and children and himself on other occasions you sure would like to do something for him now without much loss of his time.

I also state the therapeutic, analgesic, pain alleviating, bactericidal, and surgical value of the diathermy treatment.

Cordially,

M. YUDIN.

Akron, Ohio
April 26, 1926.

W. H. REYNOLDS

Mr. A. W. Mathis,
Chicago, Ill.

Dear Mr. Mathis:

Referring to yours of the 20th, will say that I think "Actual Facts and Methods Which Have Produced Sales" will be a big help; personally I have been with your organization such a short time, I feel that any suggestions I might give you would not be of much importance. However, I feel like this that if I have taken this line in this territory, without the training I received at your factory, I would have made a complete failure. It is impossible for me to say which technique is the most valuable. I have treated Pneumonia, Gonorrhea, Arthritis. I have had a machine in both Delaware and St. Francis Hospital for over a month and have gone there every day excepting Sundays and have had from two to six patients daily, and if I had not known how to apply this stuff, I would have failed.

Have had wonderful results in Pneumonia, Arthritis, and Gonorrhea. I think the best system to make sales is in knowing how to apply and actually demonstrating. I have never demonstrated on a patient that they didn't receive benefit. By the way, the last order I sent in for Dr. Meredith I. Samuels, this is what made him buy. I had made several calls on him; incidentally had told him that I would move a machine into his office, and demonstrate what Diathermy would do, but he wouldn't or didn't let me. Five or six days ago he called me up and told me he had a real case, that he would like to try Diathermy, that he had exhausted all means he had of relieving here. This case, Mrs. Paul Du Pont, Powder King, Arthritis and Neuritis right arm, had been in bed two weeks, running a temperature 101 to 102. Shoulder the most painful, whole arm and hand badly swollen. I applied Diathermy forty minutes about six hundred M., and relieved pain entirely. In three treatments she was so much improved that she could comb her hair. Coming into town I said, "Doctor, I am going to wire your order in for a Diathermy machine". He is sold on Physiotherapy. He has an Alpine Light, and he thinks a lot of it. So do I, but I think Diathermy is the apparatus to relieve pain with "right now", not a week from now.

I am,

Respectfully yours,

W. H. REYNOLDS

Wilmington, Dela.
April 24, 1926.

L. LEIBOVITZ

H. G. Fischer & Co.,
2335 Wabansia Ave.,
Chicago, Ill.

Dear Mr. Mathis:

Relative to your bulletin of the 20th of April, requesting me to give some of my sale or technic points in closing sales, I might say that I have depended more on out and out sales talks than points of technic.

One of the arguments I constantly hear is lack of space for giving treatment. I handle it as follows:

Doctor - "I haven't room enough".

Salesman - Looking around room, I point to a place where the machine should go and say, "Doctor, why there is ample space right there".

Doctor - "But that would be cramping myself."

Salesman - "With the benefits to be derived from Diathermy both in curative and monetary values, you could stand a little cramping". Or else suggest removal of some apparatus from his office. "And, Doctor, if you are sold on Diathermy, you would agree with me that you wouldn't let the matter of space prevent you from getting a Diathermy Outfit."

Then I swing into a recital of technic or indications why the doctor should have a diathermy outfit.

I have found the above argument very effective in combating the doctor who claims he has not the space.

Respectfully yours,

"Louis Leibovitz"

Brooklyn, N.Y.
April 26, 1926.

L. G U T M A N N

H. G. Fischer & Co.,
Chicago, Ill.

Gentlemen:

This is with reference to your letter of recent date asking me to submit some sales facts which I hereby enclose. I am not attempting to give you any new ideas, but hope that some points may be valuable, especially for new men.

It is my custom to first group doctors as follows:

CITY DOCTORS	COUNTRY DOCTORS
GENERAL PRACTITIONER	
SURGEONS	AGED DOCTORS
SPECIALIST	YOUNG PROGRESSIVE DOCTORS.

GENERAL PRACTITIONER:

When calling on the general practitioner in the city, I usually try to ascertain his favorite subject by asking him direct to that effect. You will find that every doctor prefers to do a special type of work. As a matter of fact, after having introduced myself and having told him the object of my visit I usually start a conversation as follows:

"Doctor, I do not know if you have used modalities of Physio-Therapy in your practice and if you are at all interested. Maybe your work is of such nature that you would not be interested at this time and in order to save you time I would appreciate it if you would let me know the type of work you are doing at the present time."

Having gained this information from this doctor, it is very easy to direct my line of sales talk. I try to make him ask me questions as to the application and results and being once engaged in a fluent conversation it is comparatively easy to interest him to such an extent as to close a sale or to make a good prospect for the near future. It does not pay to tell a Doctor that Diathermy or any other modality is a panacea or cure all. I believe it is very necessary to establish a certain confidence which will be only possible by frank and true statements as to the results to be expected in different cases. It is up to the salesman to form his opinion as to why the doctor is a prospective buyer. Some buy to get results, others to make money, some to

L. G U T M A N N

do both, and it is up to the ability and tact of the individual salesman to find out how much to emphasize the particular points which this salesman deems advisable at this time. There is no set or fixed rule governing same; however, I have found by actual experience that it is best to keep the doctor's mind on one particular subject, the one he is most interested in. Telling him how many medical schools of fame are conducting courses on Physio-Therapy will often change a skeptical mind. Distrust the man who knows everything about it, but does not do the work. Also let the doctor know that you are always near him and that you will be able to give him service at any time.

Of the city doctor, I consider the general practitioner and the internal man the best prospects.

SURGEON:

The same applies to the surgeon, only that I stress some of the points relative to surgery, but at the same time calling his attention to the use in some medical cases.

SPECIALIST:

This is the most dangerous type as it is necessary for the salesman to have an absolute thorough knowledge of the subject, anatomy and pathology. In a smaller city this is my last type to sell to as often this type seems to be very skeptical as to results and will often propagate poisonous information to other prospective buyers in the same community. One man of this type may prevent ten general practitioners from buying equipment. In a large city it does not matter, but in a small locality I always strive to sell the specialist last.

Be sure to give a doctor the right technic and make him understand the main principles of physics thoroughly, after you have sold him equipment and he will be your booster that may lead to other sales. A doctor that does not understand technic and does not get results may retard future sales in the same community, and always will be blaming you and the equipment for unsatisfactory results.

COUNTRY DOCTOR:

The aged country doctor, usually is the best prospect. He knows what you are coming for and will gladly give his time to listen to what you have to say. Many of these elderly men for a life time have been making long calls, both night and day, and are in a receptive mood for any modality which will build up their office practice. This

L. G U T M A N N

is a very strong point and usually bears good fruit.

The best way to approach young doctors in the country is to call their attention to the fact that a progressive man will be quicker able to become the respected and recognized physician in the community. Another strong point is, to call their attention that they will be able to do a certain amount of work in their office which they would otherwise have to send to the hospital. There are numerous small communities without a hospital and every doctor hates to see his patients go out of town for treatment and thereby lose financially. On the other hand, by being able to take care of such cases in his office and saving the patient both time and expenses he will be able to collect a larger office fee and gain in reputation.

I do not know if this sales data is exactly what you wanted, and in case it should not be, kindly let me know and I will gladly supply you with the right information.

L. GUTMANN.

Birmingham, Ala.
May 4, 1926.

H. J. RICHARDSON"Actual Facts and Methods Which Have
Produced Sales"

I endeavor to impress upon Doctors that I am not an agent but a "Fischer Employee", placed in district to help users get one hundred percent efficiency out of their apparatus, after they have purchased; that machines have our whole organization behind them; all techniques written by Doctors and Surgeons, with their names given, providing general exchange of ideas, constantly supplied them; giving them ideas that nothing is too much trouble to do for them, at any time. Offer your help, at any time, on any treatments. We are the only concern that is giving this service. Show and explain "Diathermy Therapy". Constant study and application to help me meet questions and give smooth demonstrations at all times, making it appear very simple. Press hard, but not antagonize; cultivate them in gentlemanly way; suggest new ideas to the ones already using; size them up first; always good chance for sale of accessories and further equipment. I always feel them out on subjects - about five of our best - to get the interest, in one or all. I always follow each one to a "Yes" or "No". Never give up. Keep coming back (10 days apart). When I get to good prospect, stick until I get to see him, if it takes several hours; rather see two or three each day (thoroughly) than large number. I have found the best method of introduction is: "Doctor, my name is Richardson representing Fischer and Company, Chicago". Then say on "Diathermy and Ultra Violet Lamps", "Heat and Light" most healing elements known, etc. I had man following me sell Alpine, because I didn't let Doctor know that I had them. I spent all of my time on Diathermy when he already had a machine (one of first calls). I always mention entire line after covering Diathermy. I show list of subjects and invite him to name reprints wanted. Always try to get your mailing lists up to date. Stress service. This is our best point.

Respectfully,

"Homer J. Richardson"

Tampa, Fla.
April 24, 1926.

G. L. K E P N E R

Dear Mr. Mathis:

In reviewing my work during the past years, in order that I might intelligently answer your letter of the 20th inst., some interesting facts have come to light. First and foremost, my sales have not been as many as I had expected; secondly, the blame can be placed without the aid of the "Pinkertons"; and thirdly, the doctors I had expected to find hard to interest have been the easiest to sell.

Every other doctor into whose office equipment has gone in my territory has been a "specialist". It is not hard to impress a specialist that in order to get referred work, he must get results above the average, and that physiotherapy, when used where indicated, gets definite reactions, and gratifying results.

Special technique I have employed in the offices of nose and throat specialists, besides electro-coagulation of tonsils (to which some of them are antagonistic) is the treatment of infected frontal sinuses, following the technique of Dr. Frank Knotts of Chicago, using a double nasal electrode attached to the Tesla pole, and a sponge electrode on the forehead, with a cord attached to it, the other end of which is thrown on the floor for a ground.

This technique is par excellent for this aggravating condition and is certainly appreciated by a suffering patient.

I understand the Fischer Company have designed a double nasal electrode to be used in this work.

Contrary to an opinion previously held by the writer that doctors were an extra smart class of men, I find they admit they have a long ways to go to reach perfection in their profession and are anxious to meet even salesmen who "know their business". Therefore, I hope this reciprocating movement on the part of the Fischer Salesmen gives me some more "eddicashun".

"The Grand Rapids Fischerman"

G. L. Kepner.

Grand Rapids, Mich.
April 23, 1926.

H A R O L D H. C O H E N

Mr. A. W. Mathis

Dear Sir:

In reply to your letter of April 20th, I hereby submit my method of producing sales.

I go from one subject to another with my prospect, until I strike one in which he is particularly interested. I then stick to that subject until I have told him all I know about it in reference to our machines. Then I continue with the other subjects and use the same tactics. In this way I do not bore my prospect with a lot of talk in which he is not interested, and I have a better chance of getting an order from him.

Hoping this may be of interest to some of the other men,
I remain

Sincerely yours,

HAROLD H. COHEN.

New York City
April 24, 1926.

E. M. R A U H

Mr. A. W. Mathis,
Home Office.

Dear Mr. Mathis:

In your recent letters you have asked for "Actual Facts Which Have Produced Sales". I doubt very much that my method will be of any value to the other salesmen, as they probably have a better one. But, as you say I will not be entitled to a copy of the booklet unless I contribute, I will try to write a few lines on my general sales method.

When opening up territory my first job is to get the names of all practicing physicians in an area small enough to cover in three weeks time. I then call on each man giving as much of my time and taking as much of his, as is consistent with good business. This being my first trip, I find out just what equipment the doctor has, if any, and then "feel him out" to find out what he really needs most. If I get a definite lead as to the type of equipment he is interested in, I mention various conditions and the results we have obtained. If then, I get the usual "I may get a machine next Fall, but not now", I send him literature and reprints. If I do not get a response as to what the Doctor might be interested in, I talk diathermy always. After making my three weeks canvass I find a number of interested prospects, after which I begin to re-canvass the same territory. In calling back the second time, I find I have a much better foundation for an interview, and often find doctors whom I thought hopeless prospects on my first visit, who were really good prospects. I continue to call on each man and find in my experience that I can really call on a doctor three or four times at little cost if I confine my work to a small area at a time, gradually kindling the spark of interest into a sale, without resorting to the so-called "High Pressure Salesmanship".

Yours very truly,

E. M. RAUB

P.S. If this letter is not in line with your request, kindly deposit in your wastebasket on your left. It positively will not hurt my feelings.

Winston-Salem, N. Carolina.
April 28, 1926.

H. C. B A L L A R D

My Dear Mathis:

Herewith my little suggestion and ideas on putting over sales to the Doctors.

My first step is to find out if the doctor has been reading articles on Physiotherapy. If not, I try to lay out a plan that will interest him, asking him what line of physical ailments he treats the most of, stating of course my reason that I wish to show him what can be done in the physiotherapy line, where medicine will not touch, or work much slower than the new method, namely, Medical and Surgical Diathermy, the use of air cooled or water quartz light, Morse Wave, etc.

If on the other hand, the doctor has not been reading up on the work, I then approach him as follows: I ask him if he knows what Diathermy is. He of course will answer in the negative. I then proceed to explain what Diathermy is, its relation to the human system, and what takes place under a treatment of applied physics. I then proceed with a few well known phrases in this form of treatment known as - Electron, Proton, Atom, Molecule, Ion, Ionization, Angstrom or wave length measurements, Millimicron, this takes in the oscillations per second into the speed of light.

Every doctor is well acquainted with the word oscillation, and I believe this is a good word to use and work upon the doctor to make him sit up and take notice; that you know what you are talking about.

On the other hand, should the doctor be interested in the work, has read up on it, but don't feel quite sure that he can give treatments should he purchase a machine - this is where I shine. I make a proposition with the doctor then and there, that if he will put in a machine, and trust me as to the Electrodes that will be necessary to give these treatments (this is where I include what electrodes I think he should have, and as you will notice in all my orders I always include from \$100.00 to \$250.00 worth of additional electrodes), I will set aside a full day on the installation of the machine to treat whatever cases he may have for me to treat, namely, all cases from head to foot, not including electro-coagulation on the first visit.

Now, when I am with the doctor, I make sure he is with me every minute, watching and learning, while I try to teach him every point.

H. C. B A L L A R D

I then come back to see the doctor in two weeks, setting aside a certain afternoon and evening that will correspond with the rest of my route for that week. I always let the doctor know when I leave him just when he can expect me on my next visit, and then I break a leg to be there on time, as the doctor never fails to line up a flock of patients for the day he knows you are coming.

I always give every doctor four of these visits, then call on him every six weeks. In this way he gets to know you, believe in you and your goods.

By giving the doctor this technic he in return takes a big interest in the work, lines up the patients for you to treat, gets the money, and in a good many cases the doctor has taken in enough money to more than pay for the machine before I have finished giving him the technic work. This of course leaves an open field for a come back for additional equipment for his office.

I could go on much further, but I think I have made myself clear and to the point.

Sincerely,

H. C. BALLARD.

Chicago, Ill.
May 23, 1926.

J O H N M. H A R V E Y

As I am only a junior with the company and a very recent student of Physiotherapy, I respectfully submit my meager tithe.

One of the first things I found out when I started handling this line was, that if I could sell one doctor in a small town (such towns as Western Canada is made up of) I had the other fellow where I wanted him. Even if I had called on all the doctors in this small town and sold the last one I called on, I made an excuse to call back on the others again the same day, to leave some further literature, etc., and let them know the other Doctor was putting in some equipment.

The first week I was with the company I was called out about six hundred miles from my headquarters to a little town of about forty-five hundred. It was quite a long jump to make especially if I did not connect. I sold my man and before leaving I sold four out of the five Doctors in town. The only way I can sell machines here, where the Fischer Co. is not so well known and we are opening up new territory, where the opposition firms have been here for years and have dug themselves in, is by two things. The one thing being Service, the other is knowing your goods and what they will do for the Doctor.

Perhaps I am underestimating my oppositions salesmen, but, I often go into a Doctor's office who has already installed some equipment and find he is getting very indifferent results. In some cases the Doctor does not know which terminals produce his different modalities. The salesman who sold him this equipment dumped it into his office, got his money and got out as fast as he could in case the doctor would ask him something about it.

When I am up against a case of this kind, for the cause of Physiotherapy as a whole, I generally spend some time with this man on an educational talk, letting him see where he made a mistake buying from a firm who did not have trained salesmen to thoroughly demonstrate the equipment and also do not have an educational department such as ours.

Personally, I think there is only one way to sell this equipment, and that is to know what it will do for the Doctor in his particular practice and for his patient.

I find a great number of the doctors here very interested in Coagulation of Tonsils, and Hemorrhoids, but, they are all waiting for the other fellow to start. There is no one in Western Canada doing this work. In fact, we have no one here doing anything spectacular along the lines of Physiotherapy as yet. Even our hospitals are very poorly equipped.

J O H N M. H A R V E Y

A feeling I generally try to impress on a prospective customer is that, if he buys any equipment he will make no mistake buying it from "The Physiotherapy Headquarters of America", the pioneers of Diathermy, with the largest educational department of its kind. A company who stands behind the goods they sell and who are always willing to help in every way the Doctor after he buys the equipment as well as before.

I am at the present time treating a Doctor himself for a severe Bursitis of 10 weeks standing, giving him one treatment a day. As he is a well known Doctor it will be a good piece of advertising if I can relieve this condition.

I do not think there is anything I can add at the present.

Very sincerely yours,

JOHN M. HARVEY.

Winnipeg, Canada.
May 5, 1926.

F. T. B U S H

Mr. A. W. Mathis,
Chicago, Ill.

Dear Mr. Mathis:

In regard to "Actual Facts and Methods Which Have Produced Sales" I submit the following:

Most of the sales I have made I sincerely believe were made mostly on service talk, that is, where the doctor is already sold on Diathermy.

I explain to him that my services belong to him as long as he uses Fischer equipment and also explain how the Fischer representatives do not have such large territories and live right in their territories, thereby being able to give him the best of service.

The Alpine Lamp I just installed in the Saginaw General Hospital, I am sure was won by service talk, as there were two other salesmen trying to get the order, one selling the Hanovia Lamps.

I sold a Doctor in Northern Michigan an X-ray and Diathermy because I had called on him every month during the winter. He says that I am the only one who has called on him this winter. Other salesmen call on him two or three times in the summer and forget him until the next summer. He thinks that is poor service.

I do a considerable amount of service work and find that it pays to take care of a doctor as soon as I can after getting a call or letter as they always tell me of a prospect when they know of one.

In cases where the Doctor has to be sold on Diathermy I first find out what kind of work he does. If it is general practice I explain how Diathermy is used in different cases, the action it has on the different cases, and the results obtainable.

Would be pleased to have this brushed up and anything left out that you would advise.

Sincerely yours,

"F. T. Bush"

Saginaw, Michigan
April 23, 1926.

L O U I S N O A H S O N

The average doctor in the east has constantly had experience with tricky, unscrupulous and bulldozing methods; consequently, there is a lack of confidence on his part when he first meets a salesman. I therefore found it necessary to establish a confidence immediately, for the whole success of the sale will often turn on the first two or three minutes of the interview.

From the little experience I have had I make it a rule on completion of a sale to note the medical school the physician attended, and also the year. In the average reception room of the doctor one can find diplomas, certificates and registrations, which insert the University the doctor you are to interview has attended, and also the year. After all, there are comparatively very few medical schools in this part of the country, and coupled with the fact that the graduating classes are so very small, one will find that when he has sold only a very few machines to graduates of different schools, he can mention the name of a doctor that has been in the class of the prospect, or perhaps a year ahead or back of him that he has heard of or knows, even though the acquaintance may be practicing miles away from his town. Upon mentioning the old familiar name, the doctor becomes "hospitability personified" and confidence is immediately established.

I therefore state that the strongest selling appeal is the testimonial appeal. Get the apparatus into the hands of physicians whose names are known (intimately or slightly) to them, and half of the battle is won. The average doctor is a heap more apt to be influenced by the indorsement of a physician he knows, and of course with the added impression of knowing that the latter is using our product.

After confidence is established, the next thing is the talk on technique on the various ailments that Diathermy or any other physiotherapeutic equipment will indicate. I found that it is not a very good policy for a salesman to dwell extensively on various medical terms and diseases, for after all the doctor studied this "stuff" a long time, and to discuss it in a lengthy chat, the salesman, who is always a layman, will find himself up against some questions that will baffle him, and will not be able to answer properly. I therefore only talk on a few subjects or conditions, but I try to master these few conditions, so that I can leave the impression of having implicit confidence in the technique on that respective condition.

LOUIS NOAHSON

Usually I try to get the physician to admit that he has a patient "chronic arthritis" condition that he is battling with, or a case of hypertension or hemorrhoids, and also always ask them about the "patients who will not lend themselves to treatment" and who therefore never return again, thereby strongly characterizing the fact that the diathermy treatment is very necessary for the initial visit, in order to assure the patient coming again frequently.

As soon as the doctor admits your logical statement of the value of the apparatus, have the order ready, and you have a good chance of obtaining his signature to it.

LOUIS NOAHSON.

Chelsea, Mass.
May 26, 1936.

B E N M. S M I T H

It is my impression that a good percentage of my sales of Diathermy Machines have resulted from a rather forceful play on that modality in urology, more especially in Gonorrhreal Epididymitis.

Either Diathermy is of outstanding value in that condition, or I have been pretty lucky, for I can attribute five sales directly to relief afforded patients so confined, and each after one treatment, and will say further that there is not a single G. U. man in my territory who hasn't a Diathermy outfit.

This condition is a particularly distressing one from a standpoint of pain, but the patient is most often ambulatory, and can come to the office for treatment. I have tried to encase the scrotum in a piece of mesh with the indifferent Electrode on the back, but was not very successful in getting enough heat to be of value without the patient complaining of burning sensation, first here, then there, then everywhere. During a demonstration at the Ingalls Memorial Hospital, Harvey, Ill., I used this method, and heard quite a sparking sound lasting only a few seconds. The next day I found my patient had quite a burn, and I lost the sale, because my competitor convinced the Hospital Superintendent that my outfit delivered a "Paradic" current or there couldn't be a burn. Since you understand that Paradism causes interruptions or shocks, and not burns, you may well know how much the Superintendent knew of Diathermy. However, I lost the sale.

Since then I have been using the Corbus Clamp, and, with the following technique, have never had any bad results.

I soap both the testicle and the clamp, and make the usual diathermy connections from indifferent and medium voltage taps on the G, with meter plugged in lower scale. I always have the patient hold the clamp himself. Place Rheostat on the 5th or last button, and open one spark point slowly. In about a minute I open the 2nd spark point, and if you note that the meter reading goes away up, you will also note that it almost immediately comes down. By this time the meter reads about 300 M.A. and I allow it to stay that way for about five minutes. Now try to open the third gap, and if you cannot, because it becomes too hot, or sparks, revert to the two gaps, and continue until the end of the treatment, usually about

B E N M. S M I T H

30 minutes, I have never gone above 400 H.A.
I give a treatment every day for about three days,
then string it out if necessary.

This is one form of treatment from which you may
expect spectacular results, which more than any single
thing is conducive of sales, especially on a sale on
a demonstration basis.

BEN M. SMITH

Chicago, Ill.
May 25, 1936.

W. P. DAHL

Mr. A. W. Mathis,
Chicago, Ill.

Dear Sir:

Although I have no extensive background of experience or exceptional success to point out in this field, and I am not in a position to give much valuable information along the lines outlined in your letter of April 20, I certainly am anxious to get in on this and profit by the knowledge and experience of the other men. I am glad to submit a brief review of a few things that I have found helpful in making sales.

With reference to your items of technique, the only thing I can think of that might be new to some men and possibly might be of some value, is the use of chamois skins underneath metal electrodes on both high and low voltage current. Soak the chamois over night in order that it may be completely saturated. I have recommended this in some instances and found that where the doctor had previously complained of surface burns, this entirely eliminated it, and gave good results.

SALES POINTS.

Some of the objections met in selling are:

1. A doctor tells you he wants to take a course in Physiotherapy before he buys.
2. He thinks it takes too much of his time.
3. He does not want to buy until he has seen the equipment.

I believe that all of these objections can be overcome by following this method:

1. Review briefly the fundamental principles of high frequency currents in simple terms leading up with homely illustrations and diagrams to the actual application in certain conditions, making it a point to convince the doctor that Physiotherapy both in principle and application is a very simple and uncomplicated thing that requires no particular previous training or experience.

2. Carry certain selected electrodes (where no demonstrating machine is carried) as for example, the Corbus, Chapman, and Plank electrodes, and exhibit them. Let the doctor handle them and illustrate how they are used, when you reach that point in the talk. I find that this concrete evidence of equipment used in connection with the machine almost invariably creates interest which words alone or illustrations will not put over, and often

W. P. D A H L

results in the sale of a machine with which to use the electrodes. It is simply a matter of reversing the selling technique, and selling a machine to operate the electrode instead of selling an electrode to use on the machine.

When we run up against strong competition, we stress the fact that most of our competitors quote their Diathermy machines stripped of accessories. I know of instances where they have sold machines to doctors and the doctor has had the machine for a matter of months being ignorant as to how or for what to use it because he has never been shown, has had no training in technique, and has not had any accessories.

We talk expert service because of the Fischer method of branch organizations, replacing jobbers, and prompt delivery of equipment, because in practically every instance, no matter how long the doctor takes to make up his mind to buy, when he finally reaches the buying point, he wants the equipment without any delay.

There are a number of other things which we find very helpful but they have been gleaned from the experience of other Fischer salesmen, who, no doubt, will bring these points out in their report.

Yours very truly,

"W. P. Dahl"

Minneapolis, Minn.
April 23, 1926.

R. V E N U T I

Regarding my sales technique. I started with Fischer Company March 1st, knowing absolutely nothing of the goods I was selling. Up to the present date I have sold one X-ray, three Lights, one Galvanic Generator and six Diathermys.

The selling points that I elaborate on are these:

"We can produce results far in excess of your anticipations."

"We can make you money on your investment."

"We can increase the number of your patients and accordingly your financial returns."

"We can show you how to improve your reputation as a doctor in your territory."

I believe if the above enumerated sales arguments are presented in the proper manner that practically any prospect, cold or warm, can be landed.

Yours truly,

R. E. Venuti.

Dayton, Ohio.
May 17th, 1926

G. L. N I C H O L A S

"Actual Facts and Methods
Which Have Produced Sales."

In selling physiotherapeutic equipment I have found the following method invaluable:

At all times I carry with me letters of a testimonial nature, complimentary to the integrity of the Fischer Company, commending their products, and incidentally lauding my efforts from a service standpoint.

These letters are not from Fischer users in New York City, Denver, Colo., San Francisco, Calif., or Cedar Rapids, Iowa, but from those located in my own territory. Of course I naturally attempt to obtain these letters from physicians who are considered both professionally and financially successful. Up to the present time I have not failed to receive this type of co-operation from any doctor using our equipment.

While letters from satisfied users are not sufficient to close sales, they are often potent factors in getting the name on the dotted line.

G. L. NICHOLAS.

Indianapolis, Ind.
May 22, 1926.

L. T. F L A K E, J R.

TREATMENT OF DISCHARGING EARS

"Doctor, in your practice, I suppose you find cases of ear discharging very common in children, and adults as well. (Here I refer to some doctors, who have found the use of diathermy and quartz light in this condition very successful.) "Doctors - - - - have been using Diathermy, and quartz light in cases of discharging ears, and claim very satisfactory results in clearing up the discharge."

"Doctor, the technique for this treatment with quartz light and diathermy is simple and will not take long." The head band electrode has proved satisfactory; with the two pointed electrodes. Cover the electrodes with a small pledget of cotton, and dip in a saline solution, then insert in the ear, as far as permissible and they are held in place with the head piece. The current is then turned on and adjusted slowly to 250 to 300 milliamperes. Doctor, you will find the Fischer diathermy very convenient, due to its sixteen points of control giving very fine adjustment."

"The diathermy produces an increased blood supply and will soften the wax, and adhesions, if there are any, leaving the ear in good condition to use quartz light, which is the next step in the treatment. The time of treatment with diathermy is five to seven minutes."

"After removing the electrode, and washing the cavity with a warm boric acid solution, fill the ear cavity with a 2 oz. solution of Mercurochrome, and it is ready for quartz light."

"Mercurochrome is a fluorescent drug, and will increase the power of ultra violet ray and carry the light over the entire cavity."

"When using the Kromayer lamp the weaver applicator will be most satisfactory. I insert this in the ear, and give 1/2 to 1 minute exposure the first treatment. The time of the second treatment will depend on the amount of erythema the patient receives from the first exposure. Repeat in three or four days."

"The Alpine Sun Lamp can also be used with the aid of an ear specula."

"Insert the specula and use the small opening in the hood, almost in contact with the specula. Ray for about three minutes."

L. T. F L A K E, J R.

"Doctor, it is very remarkable how few treatments the most of these cases require, and in the most persistent cases the treatments require very little time, some only twenty minutes over all. These treatments along with the good results, leave a very good impression on the patient. And you will find they will refer your treatment to their friends."

L. T. Flake, Jr.

Minneapolis, Minn.
May 8, 1926.

E. M. P H E L A N

Mr. A. W. Mathis,
C/o Fischer & Co.,
Chicago, Ill.

Dear Sir:

Your letter, asking me for a few points on sales ideas and technique which have helped me in closing sales, received today.

I really feel that with all the technique obtainable in both books and imprints, it is indeed hard for me to give you anything which we may term new. However, I will explain to you a technique which, if you can get the opportunity to use when you are demonstrating a machine, will in most all cases cinch the deal - at least I have found that it has for me.

The technique that I refer to is using indirect diathermy in cases of muscle soreness, such as a lame back, any strained muscle, the old-fashioned charley-horse, and is very effective in lumbago.

My technique is to place the patient on a table, using the unipolar outlet by connecting the high frequency cord to the high frequency terminal, the other end which would of course be connected to the autocondensation handle and placed in the patient's hands, and by using your foot switch to control the current, you can massage the part which is giving the patient discomfort, and by drawing the heat out to your finger tips plus the manipulation on the sore muscle, the relief to your patient is very spectacular, both to the patient and to the doctor.

I really believe that if you can show your "Doctor prospect" how to do one or two things real well, it will close the sale, as he will then believe that your other modalities are all that you claim for them.

Regarding selling points: I know it is not necessary to bring to your mind the disadvantage of knocking your competitor, and I have found that when your prospective customer puts that sly look in his eyes and asks you what you think of such and such a competitor's house, his line, or even himself, that by coming right back at him with the statement that on account of the fact of having so many good things to tell him about your own line, your house, and the service connected with it, that you are not going to have any time left to talk about your competitors - it will bring home to him the fact that you are there to sell him on the merits of your line, and he will like you more for it.

E. M. P H E L A N

I think another hard man to do business with is the habitual kidder. I mean by that, the man that starts to kid you immediately after you have made your approach, and so many of them start out with the same line, which runs something like this: "O, yes! you're representing the Magnuson X-ray Co. Let's see - they're a little bit of a house way out in Omaha, Neb., aren't they?"

My answer to that man is, "Yes, Doctor, you are right. At one time they were a small house with one room for an office, but today they are one of the largest organizations in the middle west, and they represent factories who manufacture goods that are the standard of comparison in their particular line, and by having offices in all the principal cities, we have been able to look after the needs of our customers, and to help them to grow with us in a big and prosperous field, and if you will give me but a few minutes of your time, I am sure I can show you how you too can increase your already very good business, both financially and in added relief to your patients".

Invariably you have taken him out of that kidding frame of mind, and he is ready to talk business in a business way.

And, in conclusion, don't be a bit afraid of competition. Go right after it to win, because I know you will agree with me that there is much more pleasure in writing an order where you have had a bunch of competitors on the same job than by selling a man who is all ready to buy your line and just waiting for you to come along to get the order.

E. M. PHELAN.

Des Moines, Iowa.
June 6, 1926.

A Representative of
Magnuson X-Ray Co.

W. H. VICKERY

Mr. A. W. Mathis,
H. G. Fischer & Co.,
2333-43 Wabansia Ave.,
Chicago, Ill.

Dear Sir:

I have received from our Sales Manager, Mr. F. L. Simonds, a letter asking that I contribute some item of technique which I have used in selling Fischer equipment, to be used in your collection of articles entitled, "Actual Facts and Methods Which Have Produced Sales."

In your letter to the salesmen you state that a copy of this collection will be sent to those only who have helped compile it. As methods that your other salesmen are using will be of great value to me I am very desirous of having a copy of this publication and it is this fact that prompts me to draw upon my very limited experience in selling Fischer equipment.

It was my privilege last December to visit the Fischer Factory and as a result of this visit I have been able to sell Fischer equipment, for I am so thoroughly convinced that the construction of it is the best, that nothing is spared in the development of each modality and accessory and that the organization behind it is so reliable, efficient and progressive that to my mind Fischer equipment to the Medical profession is what Tiffany is to the jeweler.

Yours very truly,

W. H. VICKERY.

St. Louis, Missouri
June 6, 1926.

A Representative of the
Magnuson X-Ray Company

W. C. A Y E R S

Mr. A. W. Mathis,
C/o Fischer & Co.,
Chicago, Ill.

My Dear Sir:

In compliance with the request of our Mr. F. L. Simonds to forward you some real sales experience of my own in the sale of Physiotherapy equipment, I am handing you herewith just a short sketch of one sale that has been my hobby in the approach I have made in practically all the sales made since my service began with the Magnuson Company. If it will help someone else to better their sales I shall feel rewarded in the proof that it is workable and the only way to put across our products.

Briefly, I introduced myself to the doctor as representing the Magnuson X-Ray Company, and am told that he is not interested in X-Ray. I find this is usually the case, and at this point have told him that it was not my mission to interest him in X-Ray, but to talk to him on a matter of investment, on which his returns will be at least 100% per year, with the control of his money in his own hands. Naturally he is interested, and wants me to tell him about it. I find him now in a receptive mood, with the usual guard against salesmen down.

I make an appointment with him for an hour's time to go into the situation without any interruption.

Now, Doctor, we have a limited time to go into the matter I spoke to you about today, and am going to ask you a few questions in regard to your practice, which will materially help us in getting to this matter of investment.

How many cases of Hemorrhoids can you recall among your patients? Some five or six.

How many cases of Asthma have you from which you are not able to get results? About ten.

How many cases of Prostatitis? Three.

Now, Doctor, we have a basis to work on, and I am going to state my proposition.

The cases you have mentioned are no doubt among your best patients, and you would like to do something for them, and only a few cases will give you a clear idea of what I am driving at.

First, I am going to take the six cases of Hemorrhoids, any one of whom would be willing to pay fifty dollars to get rid of them. Am I right or wrong? Instead of

W. C. A Y E R S

agreeing they will all be willing to pay that much, let us just figure one-half, making \$150.00.

Next, our Asthma patients. If you can give them relief it is a certainty we have a credit of \$250.00 here to our income, which is very conservative.

Next, our Prostatitis cases. These cases would add another \$150.00 to our fund, which is also very conservative.

We have here a grand total of \$550.00.

Now, Doctor, you have the necessary knowledge to treat these cases, and I have in mind a Fischer Diathermy machine, placed here in your office, which sells to you at the low price of \$750.00 installed in your office, with all the necessary accessories to treat these cases. Along with this, Doctor, I will be here to instruct you in the mechanical part of the work, and the income and returns from it are, as I told you, in your hands.

In order to show you my explicit confidence in you and your ability I am going to offer you this equipment for a deposit of \$100.00 now, and let you see how it works out in the first thirty days, after which you can send my Company \$50.00 each month until the balance of \$650.00 is paid, if, as I have told you, it will pay for itself within a year. If not, you have only to let me know, and I will take the machine back, and you have lost nothing, but have given relief to your chronic cases, which have been no doubt a source of worry to you for some time.

Doctor. Your statements are all very good, but I would have to go somewhere to study this work before I could do it, and I am too old a man to go to school again. Furthermore, every quack in the country is using these machines, and it would bring me into ill repute were I to do this kind of work.

My answer to this objection is - it was not necessary for you to take a special course every time a new product from the laboratory came out, neither is it necessary for you to take a special course to be able to use this modality, as I will personally see that you instructed in its uses. As to the part of your statement that all the quacks are using it, I want to disagree with you on this point. I will grant that a number of them are, but is it not also true that they are using practically all the drugs which the Medical profession are able to obtain? This being true, we will just look at the patients' side of the problem. Are you being fair with them if you do not use every known treatment which might bring them relief, regardless of whether the unethical element are using it or not?

W. C. A Y E R S

I believe you to be sincere in your efforts to give your patients every possible attention when they come to you for service, and I want you to know that I am just as sincere as you in my efforts to assist you also in helping them, and at the same time increase your earning capacity. Let me send you this Diathermy equipment and make me prove my sincerity and belief in it.

If, as I have previously told you, it relieves one half of the patients we have mentioned, will it not raise your standing in this community? Will it not raise your income? Furthermore, do you know of any proposition where you could invest your money and make the returns I have mentioned?

This has been my main argument, and while I have from time to time added to it, in all my sales the above has been the gist of my sales argument.

In concluding I want to say that a knowledge of a few things Physiotherapy will do, truthful statements and service, are the only requirements that are necessary to interest the percentage of Good Live Honest Physicians in our products.

Yours truly,

W. C. AYERS

Topeka, Kans.
June 6, 1926.

• • • • •
A Representative of
Magnuson X-Ray Co.

A. M. B U R L I N G A M E

Mr. A. W. Mathis,
Chicago, Ill.

Dear Mr. Mathis:

I have at hand your letter asking for my best method for selling equipment. Of course it is impossible to give all the different methods which I used as each prospect has his individual personality which calls for different approach, so I am going to take the method that has sold me more machines than any I have used. I find that the average doctor today has a good working knowledge of what diathermy will do and thru his journals realizes that he could use this modality in his office, but hesitates when the cost is mentioned. After the usual approach I start in something like the following:

Now, Doctor, if I came into your office representing your local bank and offered you some United States Gold Bonds paying 10% interest you would go and borrow the money if you did not have it on hand, to take these bonds. Now, doctor, I come into your office with a \$750.00 investment that will not only pay you 10% but as high and higher than 100% each year. Now, Doctor, let's get down to facts, and see what is the least that you could expect to realize in your present practice. Now let's see what is the very least this machine is going to make you in financial gain not counting the increase in professional prestige and practice this machine is bound to bring you. Just from looking around your office doctor I would say you have a very nice practice, have you not? Now, doctor, just how many patients do you see a week that are old chronic conditions that you give a little medicine to and probably get 2 or 3 dollars from them knowing that you can't do much for them. You say you have about ten, doctor? All right, doctor, lets say you only had two a week. We usually treat these cases about three times a week and the general fees are \$3.00, but we will say you only charged \$2.00. You see, doctor, with only two patients a week this machine is going to pay its own way besides giving you that increased personal contact with your patients and you are going to get results and when you do you are going to keep most of the cases here in your own town that are going to the larger centers for these treatments now. You see, Doctor, with only two cases a week this machine will make \$48.00 a month giving you a month for vacations, etc. This machine will mean an increase of \$528.00 or over 75% on your investment.

With this method you can break down any argument about the cost, and I have found it to be very effective to the man in the smaller towns. Whenever you show a man where he is

A. M. B U R L I N G A M E

going to gather in a few more of those almighty dollars he is going to sit up and take notice. Of course I have only given you the high spots, hoping these will be a foundation to work up your own arguments along these lines.

Yours very truly,

A. M. BURLINGAME.

Lincoln, Nebraska,
June 6, 1926.

• • • • •
A Representative of the
Magnuson X-Ray Company

E. NILSSON

Mr. A. W. Mathis,
2335 Wabansia Ave.,
Chicago, Ill.

Dear Mr. Mathis:

Complying with your request as to method employed in making a sale.

Having expounded my knowledge about diathermy to the Doc for fully two hours trying to make him sign the order, he finally admitted that he would like to have a machine if he could try one out for a week or so.

I said: "Doctor, you know we couldn't do that very well - we'd have a lot of second hand machines".

"But, I'll make you a proposition, for I feel certain that you'll like this G machine. I have confidence in you, Doctor, and I want you to have confidence in me."

"You give me a check for \$265.00 and try the machine for a week. If it is not satisfactory, you may return it, and I'll refund the money."

"How does that suit you?"

"Well, I guess that would be fair enough."

I got the check, and called three times that week to make sure the Doc was getting along all right.

My slogan is, "To Sell, Demonstrate".

Yours truly,

E. NILSSON.

Evansville, Ind.
April 24, 1926.

B. W. D E V E R I C K S

Mr. A. W. Mathis,
Sales Manager,
H. G. Fischer & Co.,
Chicago, Ill.

Dear Mr. Mathis:

It struck me as being rather egotistical for a man with as little experience as myself to tell men with years of selling how to do their work. Besides, I am not at all sure that I am able to read all the signs correctly yet, but I will tell you of a sale and the procedure I used.

** ** ** ** ** **

Dr. Klumpp owned a Wopler until shortly before I saw him. He had been treating a patient and had rather severely burnt her. As a result, though he was sold on the diathermy treatments, he had lost faith in the machines. First, I went over the technique, especially of application of electrodes, the results of different sizes, soaping, etc. After he had asked all the questions he desired to on this point, I went into the superior quality of Fischer equipment, talking over both the Doctor's and my own head concerning the relation of amperage and voltage, of the range of different ratios given on the Fischer machine with which to do different work. I spoke of how the Fischer Company, being one of the oldest Companies, had both in the laboratory and in actual practice, experimented to find just the exact relation which gave the best results with the greatest security. The Doctor asked to see the machine that evening, and before I left I gained some idea of the terms he wanted, his bank, etc., so when I returned that evening I had the notes, etc. practically ready, and after the Doctor made a brief inspection of the machine, he signed the order.

In calling on the profession one often finds a Doctor with a machine he knows practically nothing about. If the salesman will do all he can to instruct the Doctor, and not appear to be doing it from a mercenary reason, the time spent will often result in an accessory sale or a good accessory prospect.

Yours truly,

B. W. DEVERICKS.

Clarksburg, W. Va.
May 15, 1926.

J. A. F I N A N

H. G. Fischer & Co., Inc.,
2333-43 Wabansia Ave.,
Chicago, Ill.

Attention: Mr. A. W. Mathis, Director of Sales.

Gentlemen:

In reply to your letter regarding "Actual Facts and Methods Which Have Produced Sales", I submit the following brief facts as my part of the contribution:

First of all I attempt to sell myself to the doctors. I tell every prospect what other doctors are doing with Physiotherapy equipment in my territory. I cite a few interesting cases treated by each doctor and tell them the TRUTH regarding the results obtained.

In other cases I have discovered my prospect's hobby and allowed him to dwell at length on his favorite pastime. I find some of the busiest doctors prefer to talk about something else besides human ills and their cures.

After installing the machine I have the doctor select a few suitable cases and treat according to approved technique.

Last, but not least, I promise service and personal interest and render same without fail. I find the last point the most valuable of all. Every doctor knows he can purchase of an unlimited number of reputable firms but securing service after a machine is installed is his chief interest.

I realize the above contribution is very brief and may not be of any value to most of the Fischer salesmen. However, I am interested in receiving a copy of the edition for which this is intended and if these few facts entitle me to same, I will appreciate knowing how more experienced salesmen secure sales.

Thanking you for past favors and hoping to receive a copy of your valuable book, I am

Sincerely yours,

JOHN A. FINAN

Zanesville, Ohio.

W. H. THOMPSON

This will answer your letter requesting an outline of the writer's method in selling Physiotherapy equipment.

I find a large majority of Physicians well informed regarding the Therapeutic results to be expected from the proper use of various Physiotherapeutic Apparatus. Therefore, I spend very little time in going over the many ailments that respond quickly to Physiotherapy treatments.

To those Physicians who still remain skeptics, I go into all phases of treatments for various diseases and conditions, always alert to catch those conditions in which the doctor displays the most interest. This Physician I endeavor to personally accompany to the office of a doctor who is getting results in those conditions. After the necessary introduction, I endeavor to be top man in the conversation so as to direct the course of the statements of the doctor whom we are visiting to correspond one hundred percent to all my statements made to Doctor Skeptic. Very seldom do I lose the skeptical physician when I have him in a booster's office.

I exploit very elaborately the Fischer goods from the standpoint of quality, price, etc. The growth of the concern, its commanding influence over the entire Physiotherapy market, due to the elaborate Educational campaigns, Free Clinics, and making the prospect feel that the Fischer Company operates primarily to give to the profession equipment par excellent, conscientiously educating the profession to the proper use of the added therapy, so that they will not unknowingly use this valued therapy in conditions where the same is contraindicated, - thereby rendering a service equal to no other.

To those with an inclination toward increased financial returns, I inject financial advantages throughout my entire conversation, being careful not to place my statements in too pointed a measure as to infer that such a condition as finance was foremost in the doctor's attitude toward installing Physiotherapy Apparatus.

Trusting that the above lines cover your request, I am

Yours very truly,

W. H. THOMPSON.

Chicago, Ill.
April 23, 1926.

F. C. KANE, M.D.

For Facts and Methods Which Have Produced Sales.

In calling upon the doctor prospect for the first time, I ascertain if he has been getting Fischer Magazine and other literature regularly. If he is receiving them, I then ask him in which department of Physiotherapy he is particularly interested. In most instances he will say, "Diathermy", and such conditions as Endocervicitis, Hemorrhoids, Tonsils, Sprains, etc. I then arrange to demonstrate on any and such patients as he may select. In practically every instance I have my demonstrating outfit within easy reach, and endeavor to make the demonstration while the doctor shows an interest. At other times I get the Doctor to place an order subject to a satisfactory demonstration later. I have rarely failed to get a signed order after making a careful demonstration, especially on Hemorrhoids and Tonsils.

In short, I may say that Demonstration is the thing that gets the orders, especially when combined with thoro acquaintance with subjects under discussion.

F. C. KANE, M.D.

Fort Wayne, Ind.
May 27, 1926.

J. W. C A R T H Y

Mr. A. W. Mathis,
The H. G. Fischer & Co., Inc.,
2335 Wabansia Ave.,
Chicago, Ill.
U. S. A.

Dear Mr. Mathis:

Replying to your letter of the 20th inst., I am herewith detailing what I have found to be most productive from the standpoint of sales.

When unable to sell a doctor on the first call, I arrange for a demonstration, telling him I want to show him the difference between dessication, fulguration, and coagulation, and how these different methods are used in surgical diathermy.

I buy about ten cents worth of lean beef and with a plank set proceed to show the different techniques. With the rheostat on point one and one spark gap open (minutely) I spark the current over to the meat, demonstrating the fine control. I then open up the machine and with the needle in the meat, step on the footswitch and demonstrate fulguration, showing the doctor how simple it would be to remove warts, etc., by this method. I then connect up the piece of beef to the indifferent terminal and with the Plank needle in low voltage terminal demonstrate coagulation. I might say that the American Medical Journal describes dessication as the Tesla current sparked over the flesh; fulguration as the same current only the needle inserted into the flesh before turning on the current; and coagulation as a bi-polar low voltage current, the needle always inserted before turning on current.

I also demonstrate how coagulation is better for hemorrhoids by setting the machine with the rheostat on point four, all spark gaps open about one-sixteenth of an inch. I then connect my Plank needle with the Tesla pole, High, Medium and Low Voltage in turn, demonstrating the better results obtainable with low voltage, at the same time pointing out the versatility of Fischer equipment. A great many machines on the market have not got a satisfactory low volt coagulation current.

Most doctors like to do surgery and they all have patients with benign skin blemishes that should be removed. Surgical Diathermy enables them to remove these blemishes with very little discomfort to the patient as compared with any other method.

J. W. C A R T H Y

I do not know if the above will be of value to you or not. Being comparatively new with you, I will be able to learn a great deal more than I can teach.

Cordially yours,

J. W. CARTHY.

Toronto, Canada.
April 24, 1926.

H. W. MANNING

H. G. Fischer & Co.,
Chicago, Ill.

Attention, A. W. Mathis

Dear Mr. Mathis:

This will answer your letter of April 20th, relative to your proposed "Actual Facts and Methods Which Have Produced Sales".

I think the idea a very good one, Mr. Mathis, and I assure you I will need a copy even though my name does not appear therein.

I wish my experience and sales were such as to enable me to quote a couple of good selling arguments, but due to the fact that I have been with you but two short months, and my actual sales thus far very discouraging, for me to even offer a suggestion would be poor policy. However, I assure you that a year from today I can tell a different story.

It is a problem of Pioneering and Introduction out here, Mr. Mathis, as far as "Fischer and Company" is concerned. I've yet to see a Fischer installation in any town where I've called except a "K" here and there, and so far as they are concerned, they are a big draw-back, for our competitors use them as an argument against "Fischer". The Doctors as a whole seem to be familiar with everything except "Fischer", and I find it absolutely impossible to get under their skin in the first interview.

If I were to tell my methods of selling, I'd have to say I tell the doctor who I am, where I live, what I want to get acquainted with him for, I'm going to call about every 30 days, and then tell him I want to sell him my house first, second, myself, and lastly, my line, and then I lay particular stress on the service I can give him. The free literature, and reprints, etc. we have for him.

This I find gets me by the "outer sentry" and I am then able to feel him out and plant a few seeds of appreciation and start him thinking and considering.

I next find out what his specialty or hobby is, and shoot appropriate literature at him.

I trust your "book" will be a mine of information for us beginners.

Yours very truly,

Fargo, N. D.
April 23, 1926

H. W. MANNING.

W. H. BENINGHOFF

H. G. Fischer & Co.,
Chicago, Ill.

Gentlemen:

Answering yours of the 20th regarding an outline of my selling points, I beg to submit the following:

Probably the strongest argument I have been able to make to induce a sale of a Diathermy machine has been on the theme of hyperemia, making it clear to the prospective purchaser that through the specific action of Diathermy an over-active circulation is brought about, thereby hastening the action of the antibodies and phagocytes, thus assisting nature in restoring normal conditions in the part or parts affected.

Next, no doubt, would be the bactericidal effect of heat and the fact that Diathermic heat can be produced deep in the tissues; that it is conversive heat within the tissues, and therefore, is preeminently more effective than conductive heat, because in the first instance it is produced within the radius of the affected part or parts, and consequently its action is direct - - - while external applications of heat because of their principle cannot and do not penetrate sufficiently to be of any great benefit or have any appreciable effect.

Yours truly,

W. H. BENINGHOFF.

Seattle, Washington
April 24, 1926.

G. E. J A Y

Mr. A. W. Mathis,
H. G. Fischer & Co., Inc.,
Chicago, Ill.

Dear Sir:

The fact that I have been with the Fischer Company only a short time, and know very little about Physiotherapy equipment, technique, or sales points, has made me hesitate to send in anything to be used in "Actual Facts and Methods Used to Produce Sales".

From my experience in selling Fischer equipment I believe that I have had the best results in getting orders by assuring the doctors of Fischer cooperation, guaranteeing them a thorough installation and service at all times on the equipment.

I have just persuaded Dr. Clement, of St. Lukes Hospital, Duluth, Minn., to put on a one day course in Diathermy, for which he is charging \$15.00. I have informed all the doctors in my territory of this course. I think this will assist me in making a few sales, and also satisfy the men I have sold.

Yours very truly,

G. E. JAY.

Minneapolis, Minn.
May 22, 1926.

F. R. L E E D S, M.D.

The forceful article in the May issue of "Sales Management" by Mr. Mathis on "Nailing Down the Order", was the inspiration for a first-call sale made the day I read the article.

His advice to write up the order and ask for the signature early in the sales talk is mighty good advice. The idea is to keep the order book in plain sight, so the doctor won't be gun-shy when it is time to "nail down the order". Get a sales talk made up on the loose leaf plan, and after each presentation, ask for the order. By this method you will not miss the psychological moment. You'll be less liable to talk him in and then talk him out.

The morning I read Mr. Mathis' article, a letter brought bad news, and I had to start at once to drive home, but determined to sell a machine on the way, just to show I was not down-hearted.

I made a first call on a physician in a very small village, his office is in the rear of his drug store. Conditions generally did not look good for a sale, but I introduced myself and asked him if he had been reading any of the recent articles on physiotherapy now appearing in many of the medical journals.

He said, "Yes, but I'm not going to buy".

(Parenthetically, that is a good opening question. A doctor won't admit he is not up on current literature, and he will often admit an interest in physiotherapy.)

"All right, Doctor, but surely you'd look at some nice photos of new equipment."

"Yes, I'll look at the pictures, but I'm not ready to buy."

I like our collection of photos. It is easy to get the doctor to take them in his hands, and as he examined them, the salesman soon finds out where the interest lies, and is less liable to overlook a sale of some piece of equipment that might not otherwise be mentioned.

In this case, the interest was in Diathermy, especially our Hospital G. So I made a brief talk on machines and Medical and Surgical Diathermy, and soon came to the subject of the Electro-coagulation of Tonsils. This did not get across very well, so I took up hemorrhoids. This went better; some interest manifested itself in the form of questions. When we had the subject pretty well covered, I wrote an order for an H. G., and asked him to sign. He refused.

F. R. L E E D S, M.D.

Then I discussed the subject of epitheliomas, nevi, moles, warts, etc., and kept my order book and pencil in plain view.

We went into the subject of Medical diathermy, and at appropriate intervals I asked him to sign. He always refused, and sometimes gave reasons which he thought were sufficient, and I answered them as best I could.

I tried for the order until noon without success. Then I said, "Doctor, I'm coming back at one o'clock with my demonstrator and I'll demonstrate some of the things we have talked about".

I believe it unwise to ask permission to make a demonstration. The doctor will refuse in order to get rid of the salesman; also a demonstration should only come after a strong effort has been made by sales argument. Then if there seems to be a chance for a sale, put the machine in, and by all means make the doctor perform most of the experiments.

In this case I felt that I had a slim chance. He was interested but not yet sold.

At one o'clock I had my machine set up in his office. I generally demonstrate on a kidney; the colors are distinct, and a lobe of the kidney may be said to represent an epithelioma, a tonsil or a hemorrhoid, or what have you.

In this case, I treated one lobe by bi-polar electro-coagulation, as if it were a hemorrhoid. Then I handed the electrode to the doctor and told him to make a like experiment. He did a good job, so I put the order book and pencil into his hand - nothing doing.

Then we did some unipolar work, the so-called Fulguration, and I tried again for the order. Still nothing doing.

The clerk in the drug store was a girl, and I noticed some moles on her face, so I went to her and asked if she wanted those moles removed. She hesitated for awhile, and finally said, "Yes, if it doesn't hurt". I promised to try just one small mole and to quit if there was pain. The moles were hardly large enough to require local anesthetic, and I know that girls will stand a lot of pain to be made beautiful. I went at them by this indirect method, explaining that I would draw the electricity from the mole right into my own fingers so I would get the same dose she did, and I'd be mighty careful not to hurt myself or her either.

F. R. L E E D S, M.D.

We got along fine. I used an exceedingly small spark till all nerve endings were somewhat deadened, then opened another pair of points in the spark gap and hit harder and deeper till the whole tumor was dry and glowing. A second mole was handled in the same manner. My patient was a good sport and said it didn't hurt much.

Then I went over the surface of a third mole, and when about half through I told the doctor to finish the job and showed him how to handle the needle. He did a very painstaking and thorough dessication, and hunted up a couple more on the girl's neck, and went at them almost like an old hand.

I handed him the order book and pencil. Oh, Boy! Aint it a grand and glorious feelin' when they sign on the dotted line?

After he had signed, we talked for a few moments and he said that he didn't know why he ordered the machine at this time because he is not yet ready for it. Then I remembered Mr. Mathis' admonition to get some of the doctor's money invested in the machine so as to make him stay put. I asked for and received a down payment.

If you haven't read Mr. Mathis' article at least three times, get busy. I'm on my sixth reading now.

FRANK R. LEEDS, M.D.

Milwaukee, Wis.
June 4, 1926.

P A U L A. A J A S

H. G. Fischer & Co., Inc.,
2333 Wabansia Ave.,
Chicago, Ill.

Attention of Mr. Mathis.

Dear Mr. Mathis:

I have yours of April 20th requesting experiences, sales talks and technique used by your salesmen that have resulted in sales.

Being with the H. G. Fischer barely three months and having sold only five "G" machines, I am tempted to believe you addressed me by mistake. I am not conceited enough to think that my short experience can be of much use to the old timers who have blazed the trail of success of H. G. Fischer & Co. However, since you state that is the only way I can secure the experiences of others which I very much covet, I must furnish mine. I have therefore no choice and submit the following:

When I reported for training, I saw after the first expose of the activities of H. G. Fischer & Co. that I could not familiarize myself with all the apparatus dealt in by the Company in three weeks time. I therefore picked on type G and concentrated on finding out all I could about this machine. I soon found out how handicapped a doctor was without it and started out imbued with that idea, with the firm intention to do all I could to help them remove this handicap. I have cultivated this complex to such an extent that I really sympathize with a doctor unacquainted with diathermy and this feeling has considerable to do in equalizing our mutual viewpoints and helping me to feel at home with them.

The two points I strive to drive home from the beginning are that type "G" enables a physician to send heat in the shortest possible time to any part of the body that may need it, emphasizing the simplicity and harmlessness of the whole proceeding and assuming that he "the physician" knows all about the desideratum of heat. Next I bring out the surgical modality that simplifies tonsillectomy, the removal of blemishes and surface malignancies in a way heretofore impossible.

At this point it often occurs that a doctor has been told about some other apparatus such as a lamp or Morse Wave generator that is distracting his attention from type "G". I impress on the doctor the fact that the most necessary, in fact, the elementary apparatus, in Physiotherapy is medical diathermy which is used a great deal more than all the others and which in the normal development of an ordinary practice ought to make enough money for the

P A U L A. A J A S

doctor to buy all the other apparatus he may need. Here of course I must watch my P's and Q's that I do not reveal my newness in this field to the doctor. While it is true that the average doctor does not know very much about Physiotherapy, I don't think it safe practice to depend for success on the other fellow's ignorance.

I have found that the decisive point in my sales has been the assurance to the doctor that I was able and willing to teach him all he needs to know for the successful operation of type "G".

I made one sale on the assurance that I could relieve a case of acute Gonorrhreal arthritis complicated with a fresh infection. I got the fellow out of bed in a week.

While demonstrating in a hospital I sold a machine to a patient with chronic Rheumatism on the assurance on my part that long treatment with low amperage would be beneficial to him and I proved my point.

I have also found it useful to reassure the doctor from the idea that a protracted course was necessary to familiarize himself with diathermy, insisting that it is simply a new tool that readily fits in to the skill and practice he has acquired during the years of his profession.

I regret my experience is not more extensive or more diversified but such as it is, I offer it most cordially and shall look eagerly for the experiences of others.

Paul A. Ajas.

Brooklyn, N. Y.
April 25, 1926.

W. A. KILMER

My experience has been that there are three types of doctors, namely, (1) the doctor who is not interested, does not want to be interested, does not care to be convinced and who is not progressive; (2) the doctor who is open minded, progressive and is willing to be shown that what I say is true or not true; (3) the one who knows and who is convinced of the value of our merchandise.

The first class is a hard class to deal with. It seldom pays to try to convince them for the time involved in making a sale and demonstrating does not make it profitable. In some cases it can be done by putting a machine in on a demonstration basis and letting them convince themselves.

The second class is the best class to work with for they are willing to be convinced and it remains for the salesman to see that this is done. The first question I ask this type of doctor is the kind of practice he specializes in and inform him of the value and technique of the apparatus indicated in such conditions. I have found that the quoting of technique in Prostatitis and Post Operative Adhesions appeals to them. They will invariably ask for a demonstration or sign an order upon being convinced that they can use it profitably and with satisfaction.

The third class represents the doctor who is handicapped financially. This objection may sometimes be over-ruled by the partial payment plan. It sometimes can be shown to them that it is profitable for them to borrow money in order to take the 5% discount and it is found that the terms, discount, appeal favorably to doctors. There is a class in this last group who are worth considerable but who have the money invested so that it is not profitable to get ready cash. They are the type who abhor notes and who will wait until they get the cash in which to pay for a unit. This class represents men who are strong willed, who have made up their minds and will not stand pushing. If force is used on them they will invariably become offended, which may eventually mean the loss of the sale.

A great many doctors who are ready for Diathermy try to stall the issue until some other time. A reasonable amount of sales pressure should be brought to bear and the sales book technique will prove valuable in such cases.

It has been found by the writer that the salesman's phraseology in using medical terms and conditions, creates a favorable impression. This should be watched especially in approaching a doctor who is a new prospect as the first impression is generally a lasting one. The salesman's appearance should be neat. The principles of the

W. A. K I L M E R

unit you are attempting to sell should be given in brief, and the conditions which can be treated should be given as briefly as possible. The doctor is generally most interested in the reaction by which results are accomplished. The doctor should be watched for signs of interest in certain conditions and when such interest is evident the doctor should be allowed a chance to express his question.

High pressure methods are to be avoided, for while they may bring some additional sales, it generally results in cancellation. The doctor who is sold on high pressure methods will invariably become a knocker for the product which he was sold which will eventually lead to more loss than if these tactics had been avoided. However, a push must be put behind each interview for without a certain amount of aggressiveness, sales cannot be made.

Technique is a valuable asset to the salesman. This must be mastered thoroughly and it will be found that in most instances the doctor will look to the salesman as an expert physiotherapist. I have not found that any one particular technique will make a sale. I have found that the record of stability of the machine, its endurance, the lack of secondhand value, the warranties put forth by the company and especially the success with which prominent men and hospitals have used the unit, is particularly valuable.

If the doctor expresses a desire for the competitor's unit or if he has already made up his mind but has not installed the machine nor placed the order, he can generally be made to reconsider by the following method: Advise him that the competitor's machine is a good unit but that you do not believe it will give the service he expects. Ask him to install the competitor's unit on a demonstration basis and also to install our unit on the same basis. Have each salesman give him a demonstration and explanation of technique and then tell him you are willing to abide by any decision he may make after he has used both machines on a demonstration test. This inspires the doctor with the confidence which you have in your own unit and it very seldom goes to the point of where the two machines are actually installed.

Briefly, then I can say that the points which have helped me most to make sales are as follows: The educational service of the company, the stability of the machine, the proper approach of the doctor, the phraseology of the salesman, the salesman's confidence in his own apparatus, the willingness of the salesman to be of service to the doctor and the familiarity of the salesman with the use and application of the apparatus.

W. A. KILMER.

Springfield. Illinois.

B. M. KRAMER

H. G. Fischer & Co.,
2333-43 Wabansia Ave.,
Chicago, Ill.

Attention Mr. Mathis.

Dear Mr. Mathis:

In answer to your letter of April 20th, in regard to technique and sales points which may be of value to you and other men on your sales force, I shall try to be as brief as possible in my explanations.

In my experience of selling to the medical professions, Diathermy and Physiotherapy apparatus, first, I make it my point to find out what branch of medicine a man I'm interviewing is practicing. Second, what cases has he on hand at that time, which I can prove to him by demonstration that Diathermy will be a great factor in bringing about a quick recuperation to his patients. Third, service and performance at any cost to myself without any inconvenience to my customers. For example, delivery of machine within twenty-four hours and be there for installation of same. Many a sale I have taken from my competitors on account of them shipping their apparatus and not completing installation as long as two weeks after same has been received, bringing out the fact that they are not equipped to render service as the Fischer representative is. Fourth and last, always willing to help your customer to obtain the best possible results with his apparatus.

Yours very truly,

"B. M. Kramer"

Springfield, Ill.
April 26, 1926.

W. S. G R I M E S

Mr. A. W. Mathis, Mgr.,
Chicago, Ill.

Dear Mr. Mathis:

In complying with your request of April 20th, as to what I consider has, in actual practice, produced the greater amount of sales for me, and has been most beneficial in enabling me to secure orders, I feel safe in stating that it has been in convincing clients just exactly why and how Diathermy is used, what it will actually do for a patient, and just how it will bring about the cure he wishes it to. Very often I find a Doctor that is particularly interested in knowing just what Diathermy will do for a certain bad case of - say, Neuritis. My outline of talk to him on this subject is generally as follows:-

"Good morning, Dr. Brown. Have you heard of the excellent results Dr. Jones is getting in treating Arthritis with Diathermy? I would like to take a few minutes of your time to explain to you just how we get these wonderful results in treating these stubborn cases. For example, we will take a bad case of Arthritis of the knee. The first thing we do, is to put a piece of block tin half way around the leg above the knee, which is held in place by an elastic bandage. We then put another piece of the same block tin just below the knee, (halfway around the leg) underneath, as the Diathermy current always follows the shortest route from one electrode to another, so by having one electrode in this position, we will get the heat directly in the knee joint, where we wish it to be. The next step is to connect one cord to the machine and connect this to the electrode, then connect the other cord to the other side of the machine, and connect it also to the other electrode. Both electrodes must be well lathered before starting the treatment. Next we set the auto-control just where we think it will be sufficient to overcome the resistance of the knee - then after turning on the machine, we gradually open the spark gap. The gap is opened very slowly because we want the treatment very sedative. In about one minute, we increase the heat by opening the gap a little more and take about three minutes to reach our maximum heat which will be the patients tolerance. All the patient feels is a very soothing heat in the knee. Practically every case of Arthritis and Neuritis is relieved of pain after the first treatment. Of course, the relief is not permanent, but the patient will come back to you for continued treatments because you gave them relief and naturally they have confidence both in you and the machine. By continuing with the treatment, the Diathermy current will greatly increase mobilization of the

W. S. GRIMES

joint effected. In this way you will get permanent results. We treat the patient for about 20 minutes and at the end of the treatment we slowly close the spark gap because it will make the heat more lasting than if we turned it off abruptly. With the machine, it enables you to build up a large office practice, which you would much rather have than running around making house calls. It is impossible to expect to build up an office practice without the necessary office equipment. We will sell these machines on the easy terms of one-fourth down, and the rest in twelve months, so you can naturally see how easy the money part of it would be for you. I'll tell you what I will do, Doctor, I will send you a machine tomorrow and come out to install it and will treat your patients for you, so that you will be able to see how very simple it is to treat your patients."

You have my permission to correct this whereever you see fit.

Cordially yours,

W. S. Grimes.

Detroit, Michigan.
April 30th, 1926.

F. P. B U S H

H. G. Fischer & Co., Inc.,
2333-2343 Wabansia Ave.,
Chicago, Ill.

Attention of Mr. A. W. Mathis,
Director of Sales.

Dear Sir:

Here is my little offering for "ACTUAL FACTS AND METHODS WHICH HAVE PRODUCED SALES". I trust you may find one or two ideas which will be worthy of your publication.

"Selling equipment to the Medical man who knows something about electrical apparatus is vastly different than selling to the man who knows nothing about it. In my territory physiotherapy is on the whole a new thing as compared with Eastern States. For this reason, when I go into a Doctor's Office, whom I know has had little or no experience with electrical equipment, I first interest him in what Diathermy is from an electrical standpoint. By doing this, it relieves any feeling they may have of an electrical phenomenon.

I have found that after explaining what Diathermy is, and how we produce heat within the body tissues, he at once knows more about the actual application of heat, from a medical standpoint, than I do. I always allow a Doctor to feel that he is a Doctor, and I am a salesman. After I have gained the Doctor's confidence, I find that they are very willing to accept suggestions as to technique.

I always name off a number of conditions in which Diathermy is indicated. In this way I am bound to hit the Doctor on one or more subjects upon which he is at the time working, and which will at once interest him. Every salesman has some particular type of work in which he is most interested. My hobby is G. U. Cases.

When I have the Doctor interested enough so that he starts to ask questions, then I impress upon him the necessity of having equipment, showing him how it opens up a larger field of practice, and incidentally increases his income. I have shown Doctors how they can make their equipment pay for itself. If I cannot close a Doctor with some of the above arguments, I make it a point to set a time for a demonstration, oftentimes treating his patients, thus showing him by practical application the wonderful therapeutic agent we have to offer.

The best method I believe is to have a sales talk all figured out, whereby you can 'shoot your thunder' without

F. P. B U S H

having to stop and grasp for ideas.

Enthuse yourself with a certain subject, and it is catching - the Doctor will also become enthused.

Last, but not least, stick to the truth as to the limitations of our equipment, and go into an office with the determination of coming out with an order.

Cordially yours,

F. P. BUSH.

San Francisco, Calif.
May 25, 1926.

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A representative of Robert A. Fischer, Inc.

S. M. G I N S B U R G

Dear Mr. Mathis:

In reply to your request for contribution to "ACTUAL FACTS AND METHODS WHICH HAVE PRODUCED SALES", -- I regret that lack of time prevents me from presenting a contribution which would be more complete. In the urge of regular business affairs I must necessarily cut it down a bit.

As for technique, I shan't attempt to say anything, as some of the other men will doubtless bring out points of technique and treatment which will complete the knowledge already had by the men.

There is a set of objections and obstacles that I meet in the East particularly which may seem a bugbear to other men. I am overcoming them very easily with a rather simple and short selling talk. Practically every dealer of electrotherapy here absorbs delivery charges, a good many charge no interest on deferred payment, others permit an exceedingly small down payment. When the doctor springs one of the above on me, and demands the same terms that he can get elsewhere, or asks for a reduction of price, my come back is as follows:

"Doctor, I want you to realize that H. G. Fischer & Co. is one of the oldest electrotherapeutic houses in the country, and one of the very few of the original still in business in a profitable way. A concern who has gone through the period of trials and tribulations such as we, and is doing business on a large scale today, assures its customers of a continued existence in business. A man always wants to buy from a concern whom he knows will stay in business. In order to accomplish this we had to incorporate business methods in our sales; we have carefully figured out the most liberal terms under which we can conduct our business and assure ourselves of a reasonable business profit. This reasonable profit assures you, as the purchaser, that the concern will exist and enable you to receive continued service. The company in turn can pay their representatives a living wage, and thereby demand that the salesmen give the doctor whatever service he may request. Doing business this way gives us the funds with which to do extensive research work and investigation in the development of diathermy and its uses in the ethical field. There is no concern in the country which has contributed, and still does contribute, so much to the development of electrotherapy in the ethical field as we. We do more to distribute and disseminate authentic information and facts about electrotherapy than all competing concerns combined. We have for distribution to our purchasers a profuse and detailed book on diathermy therapy which comprises explicit details and technique in the method of treatment as written by leading physicians

S. M. G I N S B U R G

all over the country. We keep our users advised as to the progress of therapy as time goes on. Now, doctor, this takes money. If we ran our affairs in a slipshod manner so that we did not know what was coming in, we could not afford to spend the money we do for the benefit of you and your ethical colleagues. Conducting our business as we do on a firm business basis, and in consideration of the volume of business that we do, we give you the best apparatus available at prices always less than any competing make; in other words, if prices were the same, you get a better machine in Fischer's, but Fischer prices are lower. If express charges are absorbed by the salesman, he cannot afford to give you the service afterwards which he would if you had paid the full price, because in that event the express charges would be out of his own pocket, and service, after the sale, doctor, is the most important part of the transaction."

By the use of the above, I do not give the doctor a lot of empty excuses, nor try to tell him that I cannot afford to give him the concession that he wants, and yet I save his pride by not giving him a flat refusal; rather, I explain to him why our terms are as they are, show him why we must adhere to these terms, and the benefits he realizes in dealing with us.

I have one little objection to contend with here with reference to the MacIntosh Portable, which weighs ten pounds less than ours. I turn this objection to a favorable selling argument by pointing out that no concern will put anything in an outfit involving cost which could be omitted without impairment to the efficiency of the apparatus. The mere fact that a MacIntosh Portable weighs ten pounds less than a Fischer Portable, and our case is a little lighter, proves to the doctor that he gets more than ten pounds additional internal electrical apparatus, which assures him of a better and a more substantially built machine.

I trust the idea in back of the above will be helpful to some of the men in the field who may be confronted with the same objections.

Cordially yours,

S. M. Ginsburg.

Boston, Mass.
April 30, 1926.

F. L. S I M O N D S

HOW I HAVE MADE MY SALES.

First: By sizing up the situation and making a mental note of the doctor and his needs.

Second: By convincing him that I was sincere in my desire to be of real help, and that the thing I was explaining to him was something he needed badly.

Third: I always try to find out the names of two or three patients whose conditions are such that they would be treated successfully by Physiotherapy. A number of sales have been made by knowing one such patient and bearing down on the results to be obtained in this particular case.

Fourth: By overcoming his objections one by one, which objections can be overcome only by definite information concerning the equipment.

Fifth: Many of my deals have been helped along by selling the doctor's wife or office assistant or by getting him a technician who will take charge of the work.

Sixth: I always try to bear in mind that no one wishes to be sold, and try to work so that I make the doctor feel that he is buying.

F. L. SIMONDS.

St. Louis, Mo.
June 8, 1926.

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A Representative of
Magnuson X-Ray Company.

A. F. M O R L A N

ACTUAL METHODS THAT HELP TO CLOSE SALES.

After working up a Doctor's interest in any certain piece of equipment, I nearly always close the deal by working out in actual figures just what he can expect to realize on the money invested. Almost every Doctor has savings invested in stocks, bonds or land, and he knows that he cannot hope to make more than 10 to 15% on his investment, and is lucky if he gets that. In installing a piece of Physiotherapy or X-Ray equipment, the average Doctor can make anywhere from 45% to 200% on his investment; in fact, there is practically no limit. I try to be conservative, however, and do not place the figures too high, for a man will have more confidence in my statements generally if the expected returns are placed within reason.

• A. F. MORLAN

Omaha, Nebr.
June 8, 1926.

.....
A Representative of
Magnuson X-Ray Company.

B. W. HOLTONMETHODS THAT HELP ME MAKE SALES.

In selling Diathermy equipment, I first ask the Doctor if he believes in HEAT. After getting some expression from him I proceed to explain the advantages in the application of Heat by means of Diathermy. I also explain the advantages of giving treatments of this kind in that it keeps the patient under observation instead of letting him drift to the Chiropractor who will give any amount of personal attention.

I put the proposition simply, namely, "Diathermy is a tangible thing, and thru it you can put something on the spot that hurts and makes it feel better".

Instead of making the field too general or too inclusive, I confine my claims to relief in cases of fractures, bruises, sprains, dislocations, sciatica, lumbago, arthritis, prostatitis, endocervicitis, painful Dysmenorrhea and any conditions that ordinary heat will help.

Just before trying to close I show something of the returns that may be expected. There are 365 days in the year, deduct 65 for rest and recreation. One treatment a day, at \$3.00, for the remaining 300 days will give returns of \$900 on a \$600 or \$700 investment. This is about the least that any Doctor could expect to do.

B. W. HOLTON.

Omaha, Nebr.
June 8, 1926.

.....
A Representative of
Magnuson X-Ray Company.

H. E. TURNER

Mr. F. L. Simonds,
Omaha Office.

Dear Sir:

In reply to your letter of June 5 regarding data for Mr. Mathis, I have read over his two letters and think his plan is a very good one and would like to have one of his books, though at present I do not feel capable of turning in any real valuable sales information that would be satisfactory to be incorporated in his book. As you know, high frequency apparatus has always been my weak point and I am endeavoring to come up to the standard of some of the other boys who have been so successful along this line.

I have stuck pretty closely to the construction of the Fischer equipment and tried to show the advantage the doctor would gain by the use of high frequency apparatus, both for his own financial gain and also the benefit it would be to his patients. I have always brought forth the therapeutic value of heat which the medical profession has used since the beginning of time.

Some of the other salesmen, I know, have had two, three or four years training in medical schools and special training in physiotherapy equipment and can go more into medical terms along the line of technique than I can. I always approach such subjects rather easily so that I will not display my ignorance to my prospective customer. Some of the prospective customers we have, as you know, have made quite a little study of high frequency apparatus and its value as an agent in their offices, and such customers are only looking for the best machine to do their work, while other customers have to be sold the idea.

I always bring out the advantage that can be gained through the use of high frequency apparatus in cases such as neuralgia, rheumatism and high blood pressure, where medicine does little or no good. I very often bring out the point that the doctor may permit his office girl to collect a revenue from treatments with the high frequency machine, while he is out making his calls.

Yours very truly,

H. E. TURNER.

Denver, Colorado,
June 7, 1926.

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A Representative of
Magnuson X-Ray Company.

F. G. B R I N K M A N

Mr. F. L. Simonds,
C/o Magnuson X-Ray Co.,
1118 Farnam St.,
Omaha, Nebr.

Dear Mr. Simonds:-

I am just in receipt of your letter asking me for my sales technique. I do not know that my method will be of any help to you, but if so I am only too glad to pass it along.

First of all after entering the prospective purchaser's office, I usually feel my way along until I find out what he is particularly interested in. For example, an Eye, Ear, Nose, and Throat man that I sold a Diathermy machine to some time ago. To begin with I knew that he was a Specialist and would not be interested in the treatment of Sciatica or other ailments of the extremities. After talking with him for a few minutes, I learned that he was most interested in the removal of the inferior Turbinate by electro-coagulation, and the coagulation of Tonsils. I immediately began explaining that electro-coagulation was the thing he had been looking for, and it did not take me very long to convince him that I was right. Of course I explained fully what else could be done with Diathermy, but always returned to the subject of inferior turbinate. I have found as a rule even the general practitioner is more or less interested in the treatment of two or more specific cases. After finding that out tell him every thing you know upon that subject; never leaving out the service question. Most Doctors like attention whether they are your customers or those of a competitor.

Once I called on a Doctor who had no intention of buying a Diathermy machine. He happened to be using a Burdick lamp that was not producing the desired results. I looked at the lamp and found that the burner needed cleaning. Well, instead of telling him to send it in to the factory or cleaning it himself, I cleaned it for him. Before I left his office I had his order for a diathermy machine. I really believe that in the long run it pays to spend a little time with most of the men, disregarding the fact that they have competitive equipment, and never knock competitive equipment, especially after the Doctor has it installed in his office.

The above sums up my usual sales

F. G. B R I N K M A N

method. If it has been of any help to you, I feel more than repaid for having put it on paper.

Very truly yours,

F. G. BRINKMAN.

Sterling, Colo.
June 10, 1926.

A Representative of
Magnuson X-Ray Company.

E. B. COUFALMY METHOD OF SELLING.

In selling a Doctor on the idea of Diathermy, I first explain what the machine will do and how it does it. To me HEAT is the whole story, and is the point I stress. The Doctor may be ignorant of electrical equipment, or may be prejudiced against it, but he does know the value of HEAT, and we can immediately enter into a discussion on this common ground. He is probably not familiar with the unusual features of placing heat just where you want it, and I explain this in detail. For the man who has heard stories of burns, I make it clear that heat is applied in accordance to the toleration of the patient, and should at no time be pushed further. This means that a burn is due to negligence or at least carelessness.

After mentioning a list of conditions that can be successfully treated, I usually settle down to a discussion of one class of cases that respond with unusual results. Most Doctors hate to see a G. C. case come into the office for treatment, but after I have explained what Diathermy will do, they want to try it out. As many of the men in my territory are using this form of treatment, I have records of definite results to offer, and I quote one case after another.

According to authorities the G. C. bug dies instantly at 108 degrees and we know we can produce a temperature considerably higher than this. I have a picture or chart to show just the method of placing the electrodes so the Doctor will have a concrete illustration. The usual length of treatment in these cases is 30 minutes, but if you want real results try an hour. The extra time makes a world of difference, and will make any Doctor a real booster for the results Diathermy gives.

I bring out the point that people like personal attention, and the Doctor who is doing the business and making the money is one who is doing something definite and tangible for his patients, for they go out and tell what has been done for them. I can make the positive statement that a reliable, ethical man using Diathermy on his patients, gives the Chiro and Osteo a "run for his money" and starts him looking for a new location.

E. B. COUFAL.

Omaha, Nebr.
June 9, 1926.

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A Representative of
Magnuson X-Ray Company.

C. C. REMINGTON

Mr. A. W. Mathis,
H. G. Fischer & Co.,
2341 Wabansia Avenue,
Chicago, Ill.

Dear Mr. Mathis:

In the presentation of a profitable sales talk to a prospect on Physiotherapy, my approach and tactics vary as the occasion seems to demand. In my first interview it is my endeavor to "beat around" with a prospect until I have allowed him to expose his caliber and most vulnerable side. For instance: by a few questions it may be ascertained that a prospect is jealous of a neighboring doctor; that he has surgical, medical or industrial practice, and that his office overhead may be greater than his office income. In this way I determine also what equipment the prospect is most likely to be partial to. If, in my judgment, the prospect appears to be interested in a Quartz Lamp, I start at the beginning and go through with the whole sales talk on Quartz apparatus without deviating to any other phase of physiotherapy. In my estimation, it is important to properly select what you intend to sell your man and then stick to it at least through the course of the interview. In shifting from one type of apparatus to another back and forth, I find that I lose a sale altogether. If your judgment is good, and you sell the doctor what he needs and can profitably use, your future sales with this individual will be easy; you have earned his confidence.

I find that many physicians in general practice have a false conception of the responsibility and expense of installing and maintaining a modest X-Ray outfit. It is possible by properly visualizing a moderate installation, with what it entails and the benefits attached thereto, to interest many physicians who have never dreamed of such an addition to their equipment. For a doctor who does general practice, it is neither expedient nor profitable to maintain a three to five thousand dollar X-Ray outfit, but if it is pointed out that for from six to ten hundred dollars they can install a simple and compact outfit that will handle all of their emergency work with very little expense or trouble, they will often buy. Many times a doctor would like to keep his fracture cases right at home in his own office to avoid unfavorable comment when they do not turn out good. Again, on difficult fractures the doctor may find it a relief in his own mind to be able to check up with an X-Ray his results every week or two, which he can do for a few cents

C. C. REMINGTON

with his own outfit, whereas he would hesitate to suggest it if the patient was required to spend ten dollars at a laboratory each time. In small towns it is of enormous advertising value to a doctor to have their own X-Ray because the public always go to a doctor with an X-Ray to have their fractures treated, and thereby he gets many cases from patients that are outside his regular practice. It is seldom a patient cares to pay one doctor to reduce a fracture and another to X-Ray it. They figure it is cheaper to go to a doctor with an X-Ray for both. In a small town where there is no X-Ray the doctor must consider the time it takes to go with his patient to another town. Many times a physician and dentist can hook up on the expense of an outfit. One doctor recently told me that he had lost three fracture cases in one week by sending the patients outside his office for preliminary X-Ray examination; they simply never came back. The average Coolidge X-Ray machine will give a doctor from ten to twenty years service without any but trivial expense. In short, when it is so absurdly simple and cheap to take pictures with our Improved Coolidge Units, why should not the rank and file of general practitioners enjoy the prestige and benefits attached thereto.

Very truly yours,

C. C. REMINGTON

Milwaukee, Wis.
June 15, 1926.

A. B. BUTINE

H. G. Fischer & Co.,
2335 Wabansia Avenue,
Chicago, Illinois.

Attention of Mr. A. W. Mathis.

Gentlemen:

I regret my delay in supplying my portion to the valuable collection of "Actual Facts and Methods Which Have Produced Sales", which you are so earnestly endeavoring to compile. I have felt that because of my rather limited experience I had little of real value to offer and therefore hesitated to send in anything. However, I cannot afford to be without these valuable ideas which should prove very useful in promoting sales, and shall therefore attempt to give you the methods which I follow in rounding out sales.

I find that the fundamental necessity is a thorough knowledge of the products which you are selling, together with the ability to demonstrate the performance as well as the various modalities of treatment on same. With this foundation the salesman can more easily gain the confidence of the prospect, and the prospect will feel that you have something worth while, and that the service which you can render him will be invaluable to him. He will be more ready to take advice from you when you convince him that you know what you are talking about. However, this must be done without stepping on his toes. Show him that you are sold on it, and point out some of the leading men in his locality that are also sold on it, and be enthusiastic about it, as enthusiasm counts a lot.

Knowing the specialty of the prospect enables you to hit more at the points of interest to him, and is therefore somewhat of a timesaver. If you don't know it before talking to him, it is no trouble to ask him outright, and then work accordingly.

A simple method which I oftentimes follow on prospects who are not using physiotherapy is to call on them and learn first whether or not they already know anything about the subject, and if not, give them a brief discussion of the range of application, and some of the important accomplishments with its use, explaining briefly the ease and safeness of application. If he already knows something about it, so much the better; then suggest that he line up a few of his stubborn cases, selecting those which should respond well to diathermy, for instance, and arrange for a demonstration on these patients at his office with the portable machine. When

A. B. BUTTINE

you once get it in his office, you can go into a more extensive explanation and demonstration of its possibilities. In many of these demonstrations you will never have to take the machine away. If you see that he can handle a larger machine, tell him that you cannot let him have your demonstrator, but get his order for a larger machine, together with whatever additional equipment you can convince him will be useful and profitable for him to have.

When calling on the man who is already using equipment, find out how successful are his results. If they are satisfactory you can suggest new ideas of application and technique that will call for new accessories and applicators or go into other modalities for him to use in conjunction with his present apparatus. If his results have not been very satisfactory, try to find out why. It may be due to faulty equipment, and you can sell him something that will do the work in good style. Demonstrate this to him if necessary, and take his old machine in for a new one by showing him the many advances which have been made in the science of physiotherapy since the manufacture of the machine he is trying to get results with.

When a man complains about the work taking too much of his valuable time, turn around and show him that the most profitable and beneficial thing he can do is to hire a girl to handle that work for him under his prescription and supervision. Agree to assist in getting her started to handle the work for him. Show him that she can easily earn more than her salary, and not only become a great help to his patients and to him, but will bring in quite an added revenue which is always welcome to any man.

To promote future business through your customers, it is a good idea to keep in touch with them from time to time, and try to be of some assistance to them. They will oftentimes in turn send their friends to you for apparatus, or will make additions to their own equipment as they start to see the added revenue coming from their first investment, and the good they are accomplishing with this new method of therapy.

It is a good idea to have a few useful applicators on hand to catch a fellow for a demonstration when a case comes along which indicates the use of this applicator. You can oftentimes get them to call upon you to "do your stuff" when they get such cases, which they ordinarily have difficulty in handling with their regular methods.

A. B. BUTINE

I find it better to go out after new prospects than to spend very much time on the old hangers on, who are always going to buy, but never do.

Another thing that inspires confidence with the prospect is to show him that you are not trying to load him down with everything you've got. Sell him within his means - better too little than too much - and he'll come back to you for more. Otherwise it is apt to be a black eye for you.

The above contains a few of the ideas which I follow in my work, and I hope that there may be at least a point or so which will prove useful to someone, however trivial it may be.

Very sincerely,

A. B. BUTINE.

Portland, Oregon.
June 18, 1926.

W. A. ROUSSEAU

Mr. A. W. Mathis,
Chicago, Ill.

Dear Sir:

Being practically a new salesman with your Company, and having made but few sales, I did not feel that anything I could contribute to your "Actual Facts and Methods Which Have Produced Sales" would be of much benefit, but I feel sure that this experience of others will be a great help to all of us in getting sales, and I would like to receive a copy of this publication.

I would like to suggest that practically all the sales I have made have been produced largely in getting in close personal touch with the Doctor, not only talking Fischer equipment, but finding out by questions his income from his practice, and trying to show him what a wonderful opportunity he would have for increasing his income by using electrical equipment in treating different conditions.

Yours very truly,

W. A. ROUSSEAU.

Charlotte, N.C.
June 17, 1926.

WILLIAM L. PARKERI WILL.

This title has a matrimonial sound, but don't be alarmed - these words clinch other things besides life and destiny.

To nail the sale use these words, or their equivalent. Don't say anything, just think what you want your customer to say. But think in his words, that is - first person singular.

You see the doctor hesitates. Then think to yourself. "I might as well take this machine now as later."

Pretty soon you will get your doctor to say what you are thinking for him.

I have walked into a room thinking "Where is that contract?" and the doctor has greeted me with - "Well, I suppose you brought my contract with you?"

This may be mental telepathy or anything you care to call it.

But any salesman with the conviction in his product can at least hasten a closing by thinking actually as he would have the customer speak.

Say to yourself what you want the doctor to say to you.

WM. L. PARKER.

Los Angeles
May 26, 1926.

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Robt. A. Fischer, Inc.

